Mexican and Central American Immigrants in the United States

Health Care Access

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The California Endowment

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Mexican and Central American Immigrants in the United States

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Foreword

Since its founding as a nation (and almost two centuries before), the United States has thrived on the labor and contributions of immigrants who have come in search of a better life and economic opportunity. Today, the United States faces dramatic sociodemographic shifts, especially in the states along its border with Mexico, the most heavily crossed border in the Western Hemisphere. The close relationship between this region and "Mesoamerica" (Mexico and Central America) has strengthened in recent decades, resulting in one of the most vibrant regions of the world.

Geographic continuity, increasing economic integration, demand for low-income wage workers in the U.S. labor market, as well as economic and social inequalities and lack of social mobility in Mexico and Central America, have favored an acceleration of immigration flows to the United States. In Guatemala and El Salvador, civil wars, political violence, natural disasters, and extreme poverty also fuel emigration. The severe asymmetry between the income levels in the U.S. and "Mesoamerican" countries has also contributed to the dramatic rise in the Latin American diaspora in the U.S. For these Latin American countries, emigration has been an "escape valve" to mitigate serious social and economic tensions.[1]

Differences in population density and age profiles, world trade competition, and remittance flows from individuals to their families and hometown communities are critical factors in this dynamic. The U.S. has a population density of only 34 people per square kilometer (the comparable figure for the United Kingdom is 247),[2] and much of it is barely inhabited. It is not by accident that over the past 40 years the U.S. has absorbed a massive influx of new immigrants who have made substantial contributions to its economic development. An imbalance between growing populations in Latin America and labor shortages in the U.S. has contributed heavily to regional migration. Simultaneously, the average age of the U.S. population is rising. Only 35% of its population is under age 25, compared to 60% of Mexico's. Many young Mexicans are emigrating to their northern neighbor—the average age of Mexican immigrants is 21.

These factors raise a fundamental question: How will the U.S. continue to sustain its economic growth and maintain world trade leadership without the continuous flow of cheap, plentiful labor from Mexico and Central America? California's economy is the largest in the U.S. and fifth largest in the world. A cornerstone of that economy is agriculture, which is almost completely dependent on the Mexican-origin labor force. Eight out of 10 agricultural workers in California come from across the southern border.

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[1] Paula Gosis, (2006). Remittance Flows to Latin America. The Economist Intelligence Unit.

[2] George Friedman (2006). Borderlands and Immigrants. www.stratfor.com.

Remittances to family and countrymen from "Mesoamerican" workers in the U.S. also contribute to this complex regional interdependence. Approximately 75% of Mexicans and Central Americans living in the U.S. send money home on a regular basis. These resources support consumption and stimulate local demand. But apart from alleviating poverty, the money that workers in the U.S. send to their communities of origin makes an enormous contribution to the socioeconomic and political stability in the receiving countries.

Despite the positive impact of remittances from those who leave, emigration represents a serious drain of human capital. A large percentage of people heading north have a secondary education, and in countries with illiteracy rates in the double digits this can be devastating to budding economies. Educational capital is not the only loss. These countries invest in the health of their populations beginning at birth. As immigrants, they arrive in the U.S. healthy. However, their health dramatically deteriorates after several years of living in this country. The grueling work they perform in the U.S., often deplorable living conditions, and lack of access to health care all contribute to their decline in health.

Good mental and physical health are essential to an immigrant's capacity to function in society and be productive. A sense of health and well-being not only benefits the immigrants themselves and their families, but also has larger social and economic implications for both the receiving communities and the places of origin. The health of immigrants, particularly the poorest and most mobile among them, is therefore a serious concern that would benefit from a genuine binational perspective and serious and thoughtful responses on both sides of the border.

One of the most worrisome trends of Mexican and Central American migration to the United States over recent decades has been the notable increase of unauthorized workers seeking employment. The intensity and scale of this trend have catapulted the international migration debate to the top of the political agendas of all nations involved.

There is no doubt that Mexican and Central American migration to the United States will continue. With this in mind, we must move quickly to respond to this growing phenomenon with a cooperative, binational approach to developing strategies and policy guidelines that address the most pressing needs of these groups while they live and work in the United States.

The Mexican Ministry of Health, the University of California (through the California-Mexico Health Initiative of the California Policy Research Center, Office of the President), the UCLA Center for Health Policy Research, and The California Endowment have commissioned this document so as to present an objective, comprehensive overview of health-related matters faced by Mexican and Central American residents while in the United States.

The document focuses on the population of Mexican ancestry in the United States and in California, with an emphasis on immigrants. Beginning with the numbers, trends, and sociodemographic characteristics of this population, it goes on to depict their geographic dispersion across the U.S., the economic and social importance of remittances sent back to Mexico, their social conditions, and their medical insurance coverage. It also includes a brief description of the Central American immigrant population and their situation regarding access to health services. It concludes with some final remarks about the main characteristics of Mexican and Central America immigrants, to

be considered in any new strategies designed to increase their access to health insurance. The document makes no attempt to be exhaustive; instead, it offers an approach whose purpose is to stimulate a more thorough, multidisciplinary study. We sincerely hope and expect that this report will inspire new initiatives and strategies that can lead to improved access to culturally competent health care for these populations, and ultimately contribute to improved health and enhanced dignity of all immigrants and their descendents who will be a major part of the fabric of the new California in decades to come.

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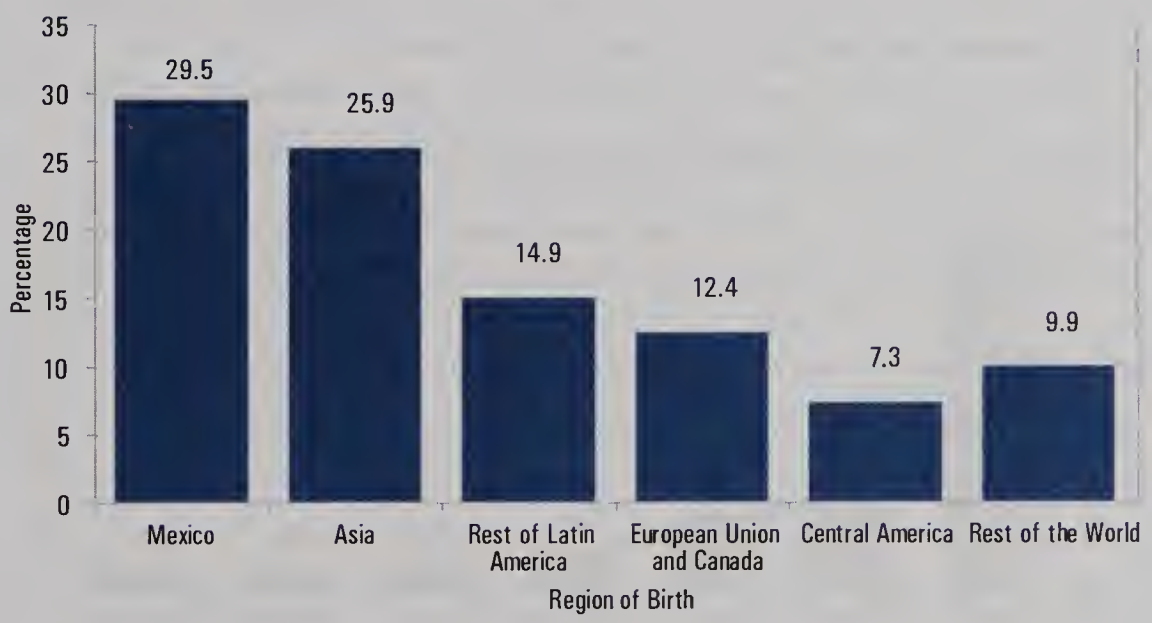
Dr. Robert Ross, President and CEO
The California Endowment

Mexican Migration to the U.S. Has Increased Dramatically in Recent Decades

Between 1970 and 2000, the foreign-born population in the U.S. grew rapidly.[1] In 1970, the U.S. was home to 10.6 million immigrants; during the next 30 years 22.6 million more immigrants arrived, over half of whom came between 1990 and 2000. Mexico has provided the single largest flow of immigrants in these years, accounting for 40% of the increase in the foreign-born population.

In early 2005 the U.S. immigrant population was estimated at 37.4 million, 11 million of whom were from Mexico (29.5%).[2] These figures make Mexicans the largest national group among the U.S. immigrant population, with more immigrants from Mexico than from all Asian countries combined (Figure 1). The 11 million Mexican immigrants account for 3.8% of the U.S. population. Together, Mexican immigrants and Mexican Americans (U.S.-born, of Mexican descent) totaled 28.1 million people in 2005 (Figure 2).

Figure 1.1 Population Born in Mexico and Other Parts of the World Resident in the United States, 2005

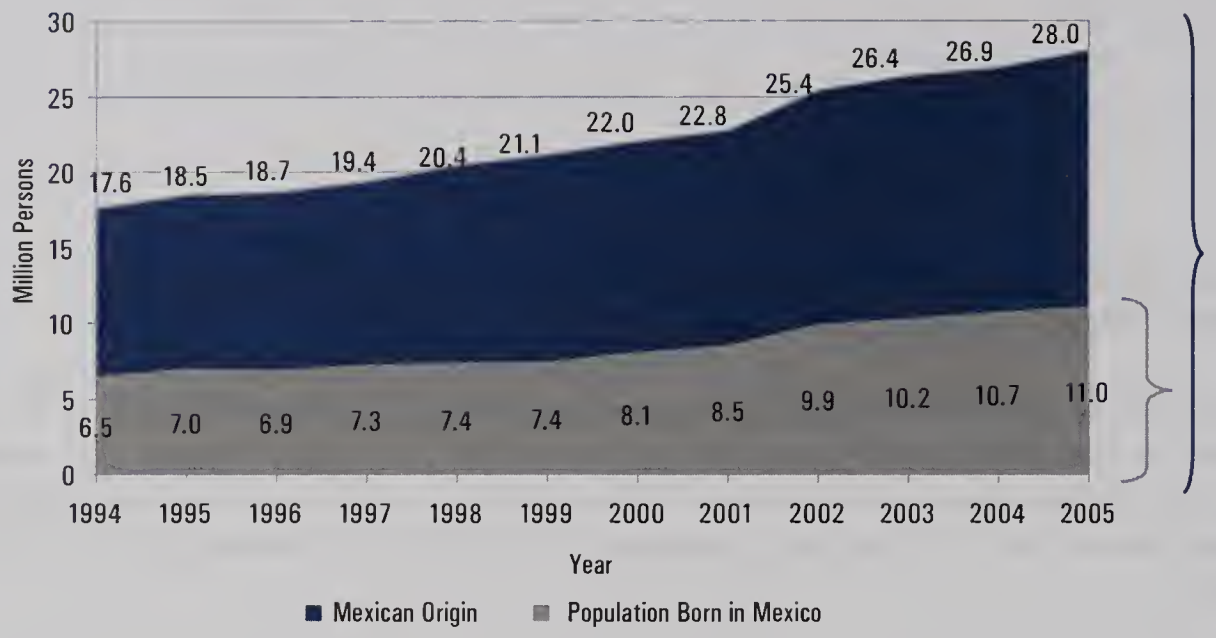


Source: Estimates based on U.S. Census Bureau. Current Population Survey. March 1995,2000, and 2005.

[1] The main sources of information used in this study are the census samples of the U.S. Population Census and the Current Population Survey for various years. In both cases, the foreign-born population is used as an indicator of the immigrant population.

[2] Based on the March 2005 Current Population Survey.

Figure 1.2 Population Born in Mexico and of Mexican Origin Resident in the United States, 1994-2005



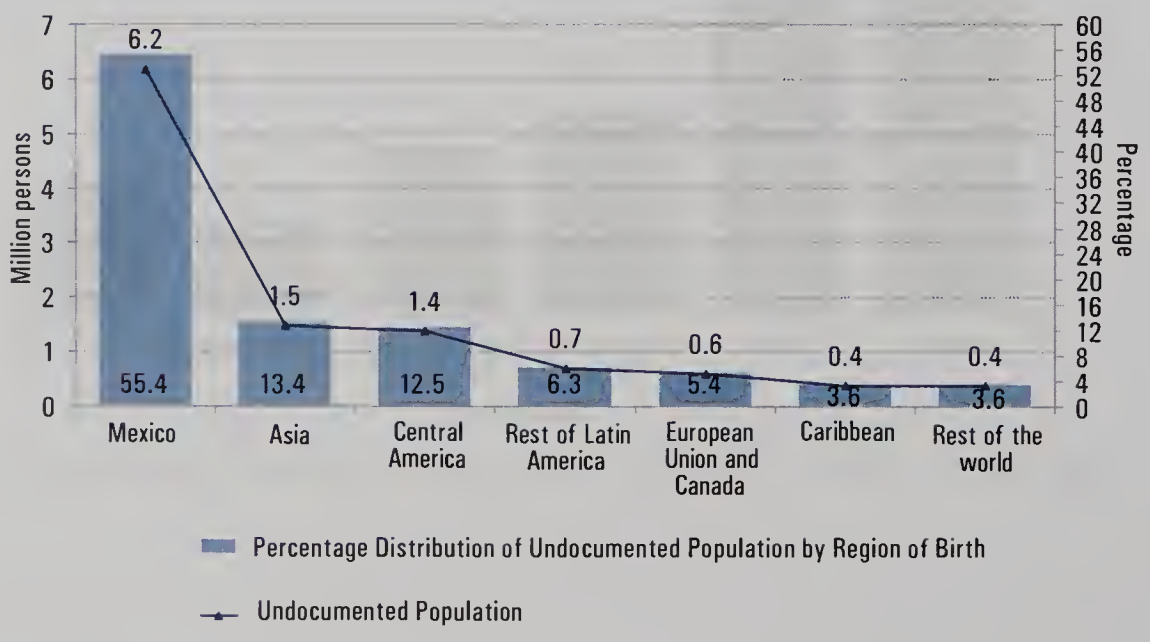
Source: Estimates based on U.S. Census Bureau. Current Population Survey. March 1994-2005.

Undocumented Migration Has Become Predominant

Contemporary emigration of Mexicans to the United States has occurred in the context of the growing integration of both countries' markets, including the labor market. However, the legal immigration channels to the U.S. have proved too restrictive relative to the demand for migrant workers. This has produced a spectacular increase in undocumented immigration from Mexico, which has led to increasing tension between the two countries as well as within each country.

According to Pew Hispanic Center estimates, approximately 6.2 million Mexican citizens are living in the U.S. without authorization (undocumented).[3] They account for 55% of the estimated 11.2 million undocumented immigrants in the U.S. (Figure 3).

Figure 1.3 Undocumented Population Resident in the United States, 2005

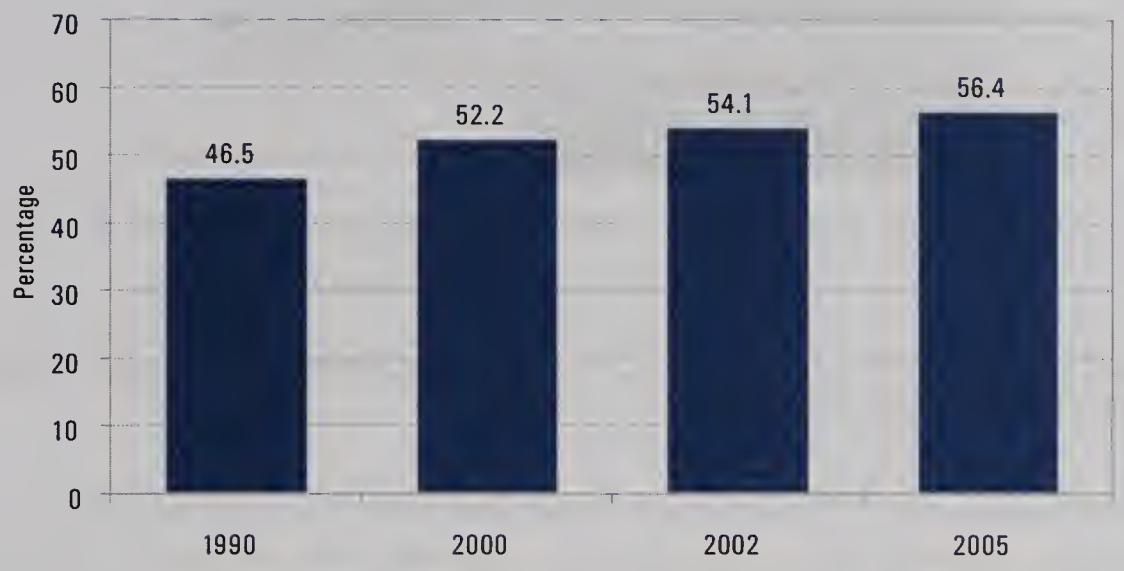


Source: Jeffrey S. Passel. The Size and Characteristics of the Unauthorized Migrant Population in the U.S. Estimates Based on the March 2005 Current Population Survey.

[3] Jeffrey Passel and R. Suro (September 2005). Risk, Peak and Decline: Trends in U.S. Immigration 1992-1994. Pew Hispanic Center Report.

The large increase in the U.S. Mexican population is due to growth in both documented and undocumented immigration. But while legal Mexican immigration increased by 108% between 1990 and 2005, the number of undocumented immigrants rose by 210%.[4] The proportion of undocumented Mexicans among the Mexican-born population in the U.S. rose from about 46% in 1990 to 52% in 2000 and was estimated at 56.4% in 2005 (Figure 4).

Figure 1.4 Percentage of Undocumented Immigrants in Relation to Total Number of Mexicans Resident in the United States, 1990, 2000, 2002, and 2005



Source: Jeffrey S. Passel. Mexican Immigration: The Latest Pew Hispanic Center.
Jeffrey S. Passel. The Size and Characteristics of the Unauthorized Migrant Population in the U.S. Estimates Based on the March 2005 Current Population Survey.

Data from the Survey on Migration on Mexico's Northern Border (EMIF) confirm that undocumented immigrants from Mexico have become the predominant source of labor migration flows to the U.S. from Mexico.[5] Unauthorized Mexican immigrants accounted for 48% of the Mexican migrant flow between 1993 and 1997, 63% between 1998 and 2001, and 78% from 2001 to 2005. The fact that an extremely high and growing percentage of unauthorized immigrants participate in the labor market (76% in 2001-2005 compared with 49% in 1993-1997) is indicative of the disparity between the U.S. economy's labor demand that Mexican workers satisfy and the size of existing channels for legal immigration (Figure 5).

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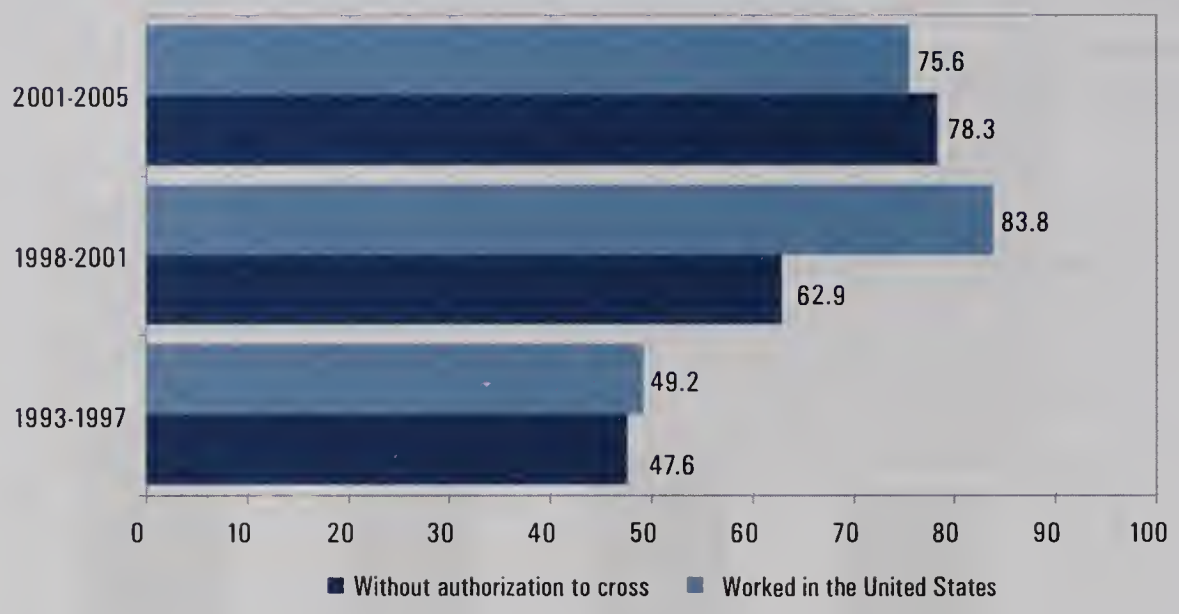
[4] Jeffrey Passel (2004). Mexican Immigration to the U.S.: The Latest Estimates. Migration Policy Institute.

[5] The Survey on Migration on Mexico's Northern Border (EMIF) is a project by El Colegio de la Frontera Norte, the National Population Council, the National Immigration Institute, the Labor Secretariat, and the Foreign Affairs Secretariat of Mexico.

Figure 1.5 Percentage of Temporary Migrants who Migrated Without Documents to the United States and Percentage Working During Their Stay,1993-2005



Source: Estimates based on STyPS, CONAPO, INM and EL COLEF. Survey on Migration Along the Northern Border of Mexico (EMIF), 1993-2005, Return Flow.

From Temporary Migration to Permanent Immigration

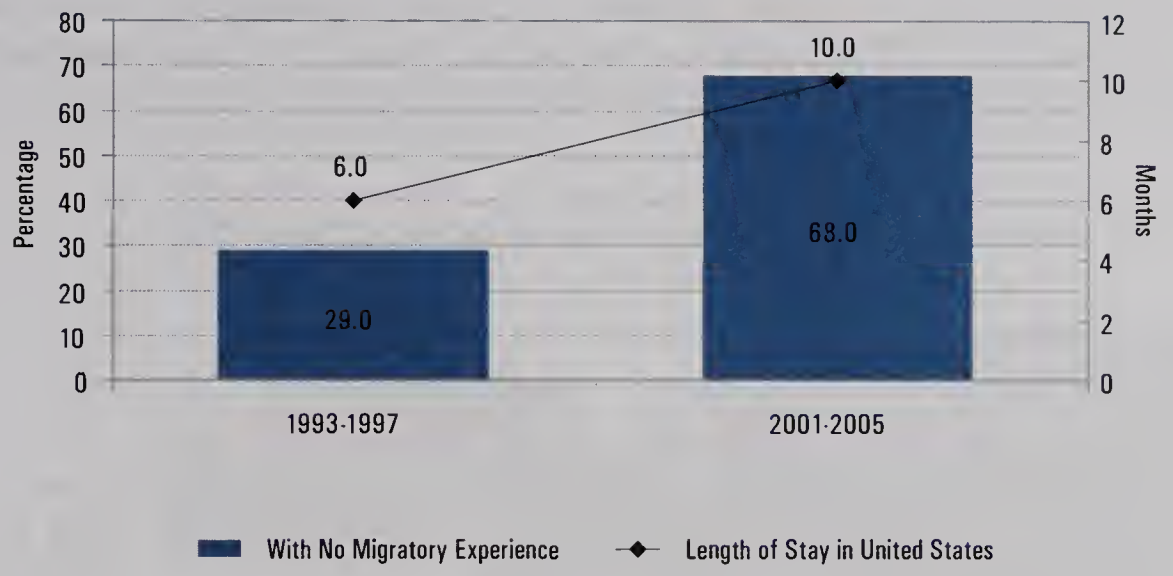
U.S. government actions to close the southern border and control the passage of undocumented immigrants have increased the risks and costs of crossing the border, especially for those migrants who used to work for fixed periods in the United States and then returned to Mexico. Although the growing barriers have failed to stop the flow of migrants, they have reduced the opportunity for circulatory migration and increased the trend toward permanent migration. Much of the previous temporary migration is therefore becoming transformed into permanent undocumented immigration.

EMIF data provide supporting evidence of this change. The average stay of the temporary migrant (i.e., those who remain in the U.S. for less than three years) increased from 6 to 10 months between 1993-1997 and 2001-2005. And whereas in 1993-1997 only a minority of migrants had no migratory experience (29%), from 1998-2001 onward the percentage of those without migratory experience increased, reaching 68% (Figure 6).

Mexican Immigrants Now Settle Across the U.S.

About two-thirds of the Mexican-born population in the United States is concentrated in four states bordering Mexico, all characterized by a long tradition of receiving Mexican immigrants. California has by far the largest number of native Mexicans (4.7 million), followed by Texas (2.2 million), Arizona (614,000), and New Mexico (120,000).

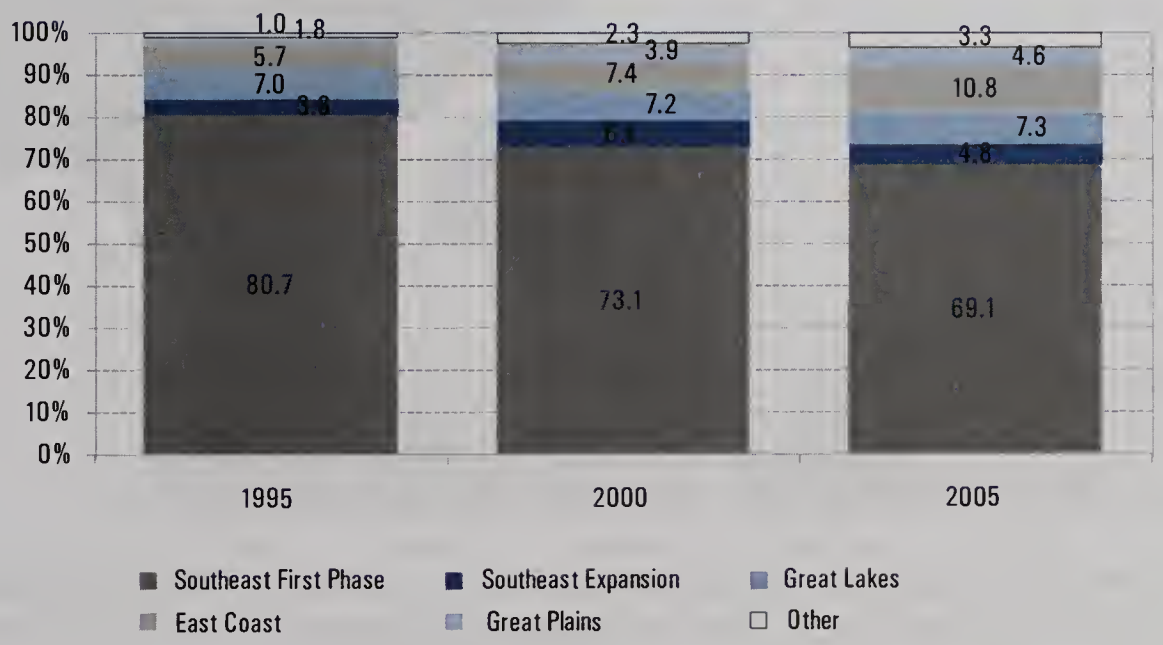
Figure 1.6 Previous Migratory Experience and Average Length of Stay in the United States of Temporary Migrants, 1993-1997 and 2001-2005



Source: Estimates based on STyPS, CONAPO, INM and EL COLEF, Survey on Migration on the Northern Border of Mexico. (EMIF), 1993-2005, Return Flow.

Although this border region has continued to play a key role in the reception of Mexican immigrants, its importance has been gradually reduced as Mexican immigrants have headed to new destinations. This trend has been obvious since the late 1990s. The border-zone states accounted for 81% of Mexican immigrants in 1995, 73% in 2000, and 69% in 2005 (Figure 7).[6]

Figure 1.7 Distribution of Mexican Population Living in the United States by Region of Residence 1995, 2000, and 2005

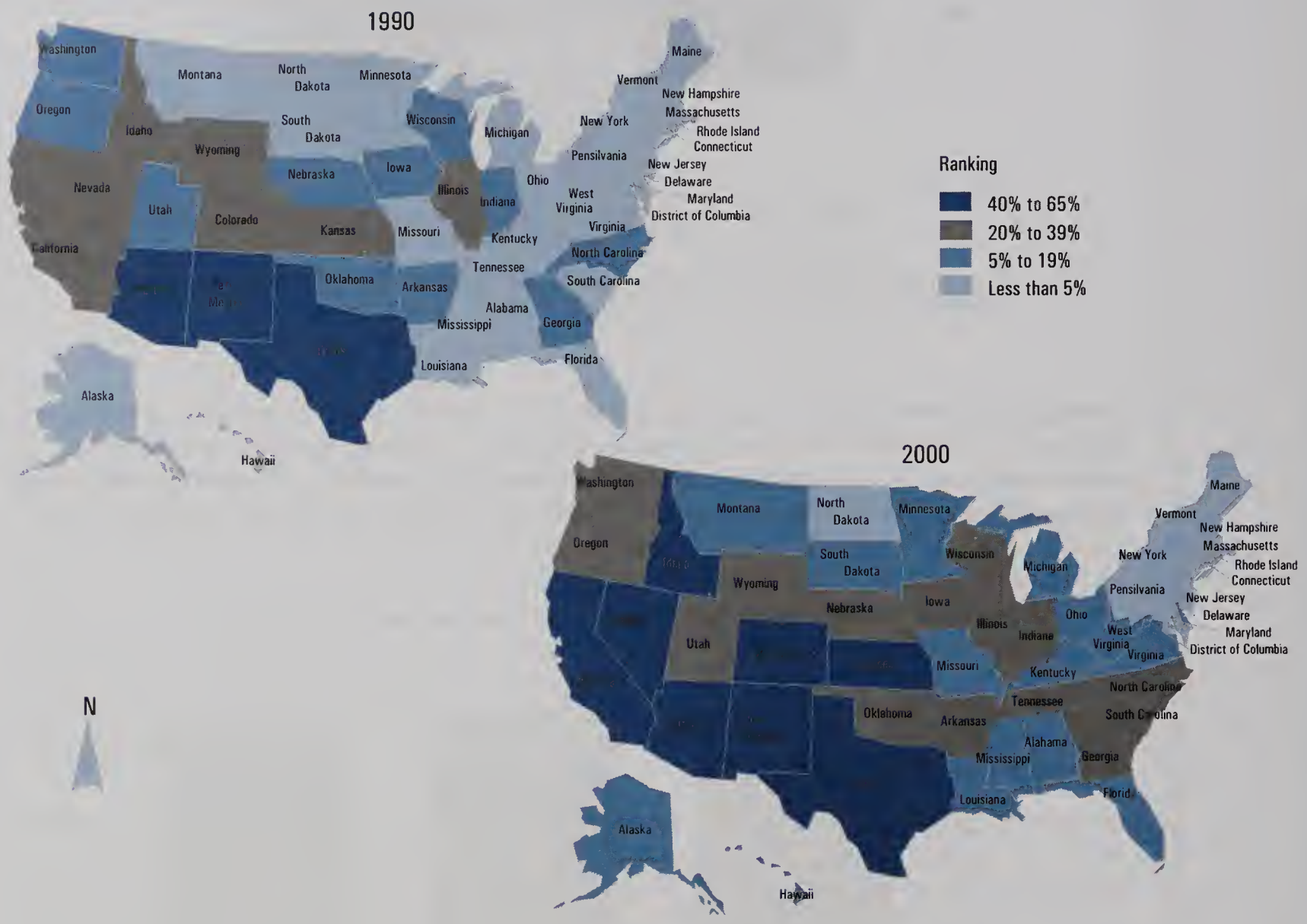


Source: Estimates based on U.S. Census Bureau. Current Population Survey, march 1995, 2000, and 2005.

[6] Durand and Massey (2003) define five regions where Mexican immigrants to the U.S. live. The Southwest First Phase includes the border states of Arizona, California, New Mexico, and Texas. The Southwest Expansion includes adjacent states where Mexican immigration next extended to—Idaho, Nevada, Oregon, Utah, and Washington. The Great Lakes region includes Illinois, Indiana, Michigan, and Wisconsin. The Great Plains states are Colorado, Iowa, Kansas, Missouri, Nebraska, Oklahoma, and Wyoming. The East Coast region includes the states between Florida in the south and New York to the north, excluding the northeastern states above New York.

As their numbers increased and their destinations became more diverse, Mexican immigrants became the largest immigrant population in virtually all states. Between 1990 and 2000 there was a notable increase in the number of states with a high proportion of Mexicans among the immigrant population. In 1990, Mexicans accounted for 40% to 65% of the foreign-born in only three states, and 20% to 39% in seven. By 2000 there were eight and 15 such states, respectively (Figure 8).

Figure 1.8 Proportion of Mexicans in Relation to Total Immigrants by State, 1990 and 2000



Source: Estimates based on U.S. Census Bureau. 5-percent sample 1990 and 5-percent sample 2000.

Mexican Household Variety and Complexity in the U.S.

Intensified Mexican immigration to the U.S. has led to an estimated 4.1 million households headed by someone Mexican-born. In 2005, this number represented 3.6% of all U.S. households[7] (and, if they were in Mexico, 15.7% of all Mexican households).[8]

Mexican households have several characteristics that distinguish them from other groups of immigrants and the U.S.-born population, reflecting their enormous complexity.

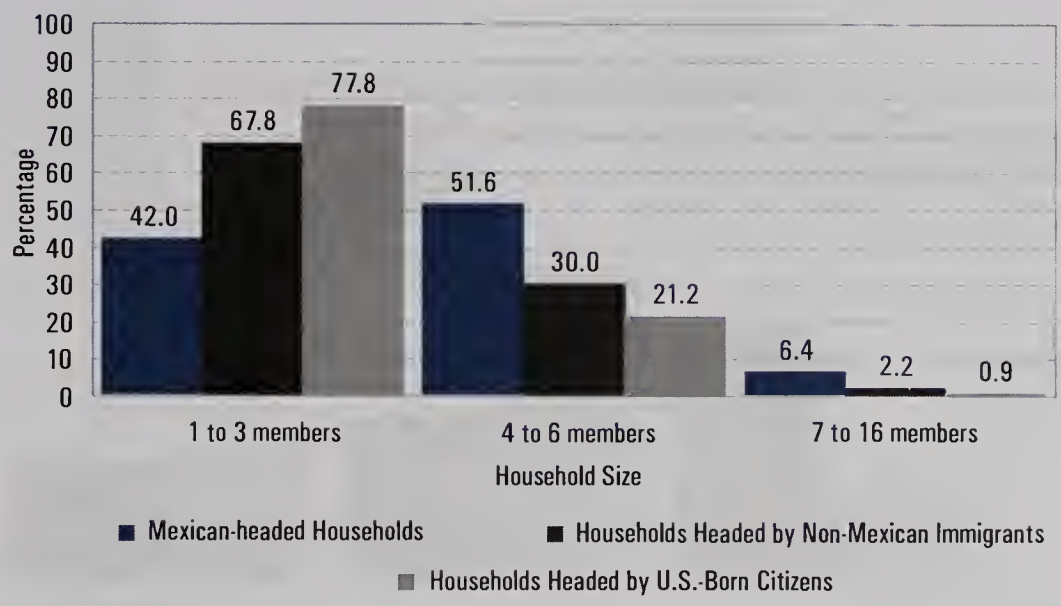
---

[7] Based on the March 2005 Current Population Survey.

[8] Based on the Conteo de Población y Vivienda, 2005 in Mexico.

First, each household is comparatively large. Over half of all Mexican-headed households (52%) have between four and six members, compared with 30% of households headed by non-Mexican immigrants and 21% headed by U.S.-born residents (Figure 9).

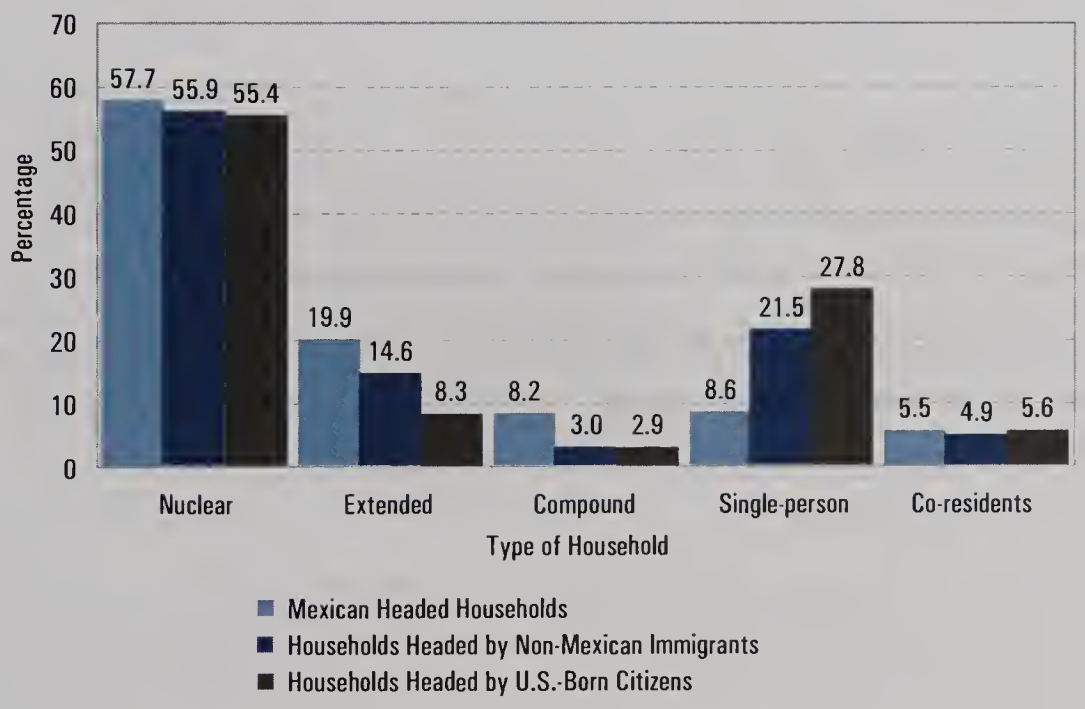
Figure 1.9 Size of (Mexican and Non-Mexican) Immigrants' Households and of US.-Born Population, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey. March 2005.

Although the majority of Mexican households are nuclear (58%), almost three out of every 10 are extended or compound households, a fact associated with their greater willingness to take in relatives and, to a lesser extent, nonrelatives.[9] This characteristic reveals the importance of family and social networks in facilitating migration (Figure 10).

Figure 1.10 Households of (Mexican and Non-Mexican) Immigrants and of US.-Born Citizens by Household Composition, 2005

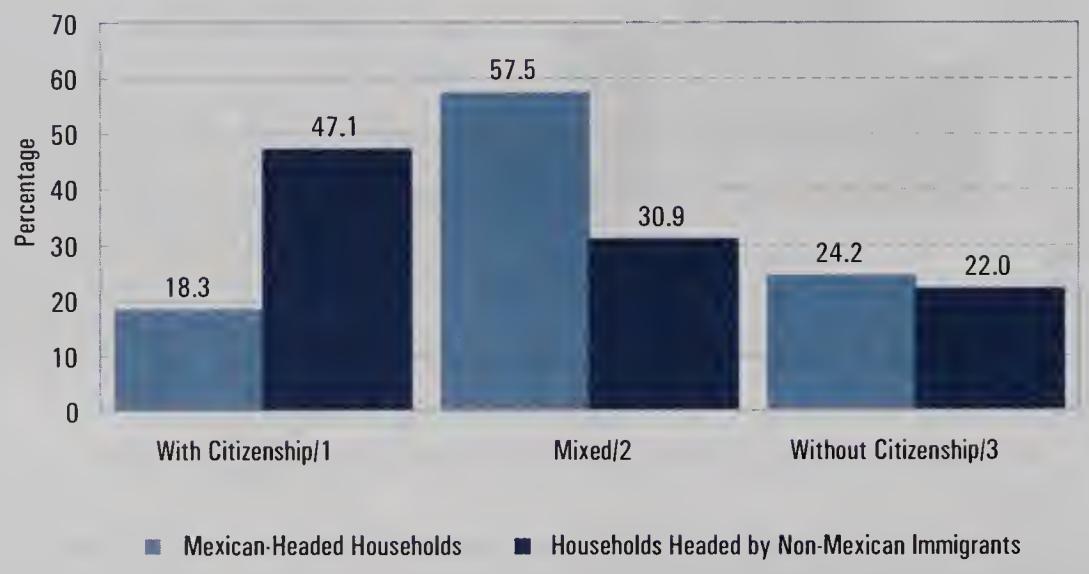


Source: Estimates based on U. S. Census Bureau. Current Population Survey. March 2005.

[9] *Nuclear households* are defined as those formed by the head of the household and his/her spouse, with or without children, or else the head of the household and his or her offspring. *Extended households* consist of the nuclear family and one or more relatives. *Compound households* consist of nuclear and/or expanded households and at least one other person without a kinship link to the householder. *Single-person households* consist of one person, while *co-residential households* consist of people without kinship links to the householder.

Another aspect distinctive to Mexican family units in the U.S. is their tendency to form mixed households, comprising both citizens and noncitizens. Eighty-two percent of Mexican-immigrant headed households have one or more members who lack American citizenship. In one out of every four Mexican immigrant-headed households (24%) no member is American citizen; in over half (58%) at least one member has naturalized and one has not; while in fewer than one in five (18%) are all members U.S. citizens (Figure 11).

Figure 1.11 Households Headed by Mexican and Non-Mexican Immigrants Resident in the United States, by Members' Citizenship, 2005

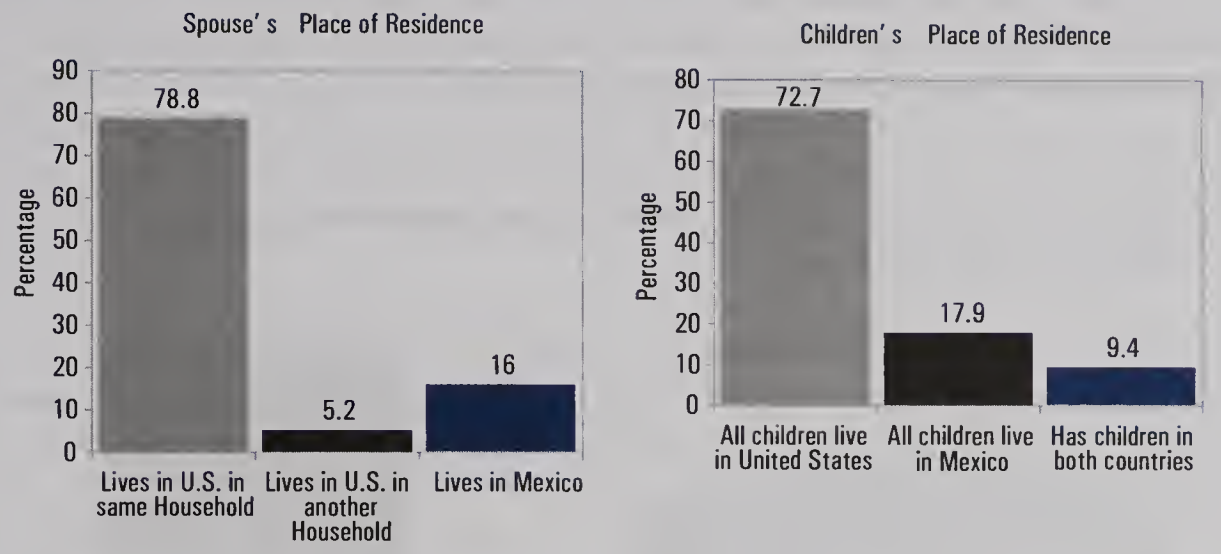


Notes: 1/ All household members are U.S. citizens.
2/ At least one of the household members is a U.S. citizen and one is not.
3/ None of the household members is a U.S. citizen.
Source: Estimates based on U.S. Census Bureau. Current Population Survey. March 2005.

A final aspect worth noting is the division of the nuclear family observed among a considerable number of immigrants who are either married or living together. According to the Survey of Mexican Migrants, conducted by the Pew Hispanic Center, the spouse of one out of six (16%) Mexican immigrants in the U.S. was living in Mexico at the time of the interview.[10] Likewise, more than one out of every four (27%) of those interviewed had at least one child residing in Mexico. Any social policy attempting to benefit the Mexican immigrant and his or her relatives must obviously consider the enormous variety and complexity of their domestic units (Figure 12).

[10] The Survey of Mexican Migrants was conducted by the Pew Hispanic Center, the Institute for Mexicans Abroad, and the University of Southern California. The survey was conducted at seven Mexican consulates in the U.S. on a sample of persons applying for Consular Registration between July 2004 and January 2005.

Figure 1.12 Distribution of Mexican Immigrants by Spouse's and Children's Place of Residence



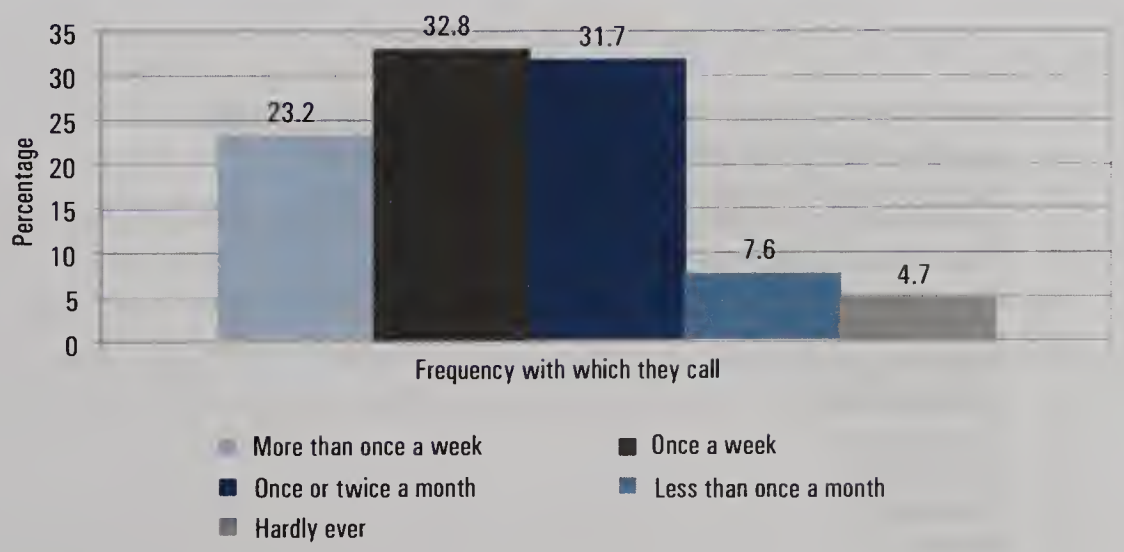
Source: Estimates based on Pew Hispanic Center, Institute of Mexicans Abroad, and University of Southern California. Survey of Mexican Migrants, July 2004-January 2005.

Mexican Immigrants Have Strong Transnational Links

One of the most striking characteristics of international migration is the intense links immigrants maintain with relatives and friends in their places of origin. Because immigrants establish close ties in the societies where they settle, they become transnational agents. In responding to the interests they maintain in both societies they selectively incorporate cultural features of their country of arrival and trigger numerous changes in their places of origin.

The Survey of Mexican Migrants clearly illustrates the close links between immigrants and their relatives in their countries of origin. Over half (56%) contact their families by phone at least once a week, and nearly nine out of 10 do so at least once a month (88%) (Figure 13).

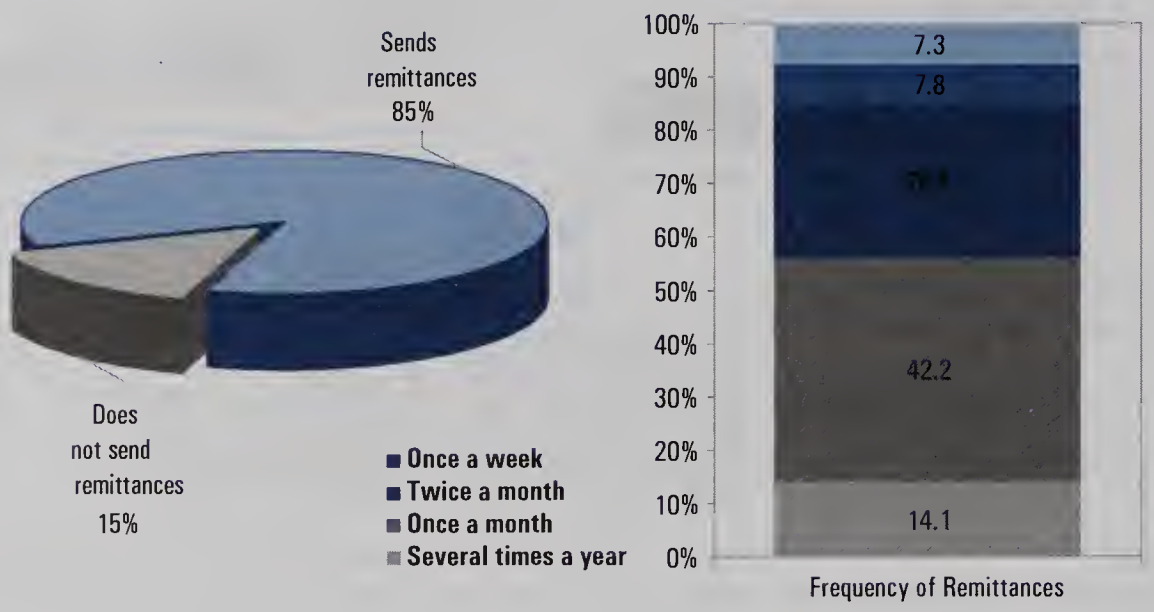
Figure 1.13 Frequency with Which Migrants Call Relatives in Mexico



Source: Based on estimates by Pew Hispanic Center, Institute for Mexicans Abroad, and University of Southern California. Survey of Mexican Migrants, July 2004-January 2005.

Sending economic resources, or remittances, to relatives in the country of origin is one of the clearest expressions of the transnational links generated by migration. The survey quoted earlier indicates that over 85% of the interviewees send remittances to Mexico, while over eight out of 10 do so one or several times a month (Figure 14).

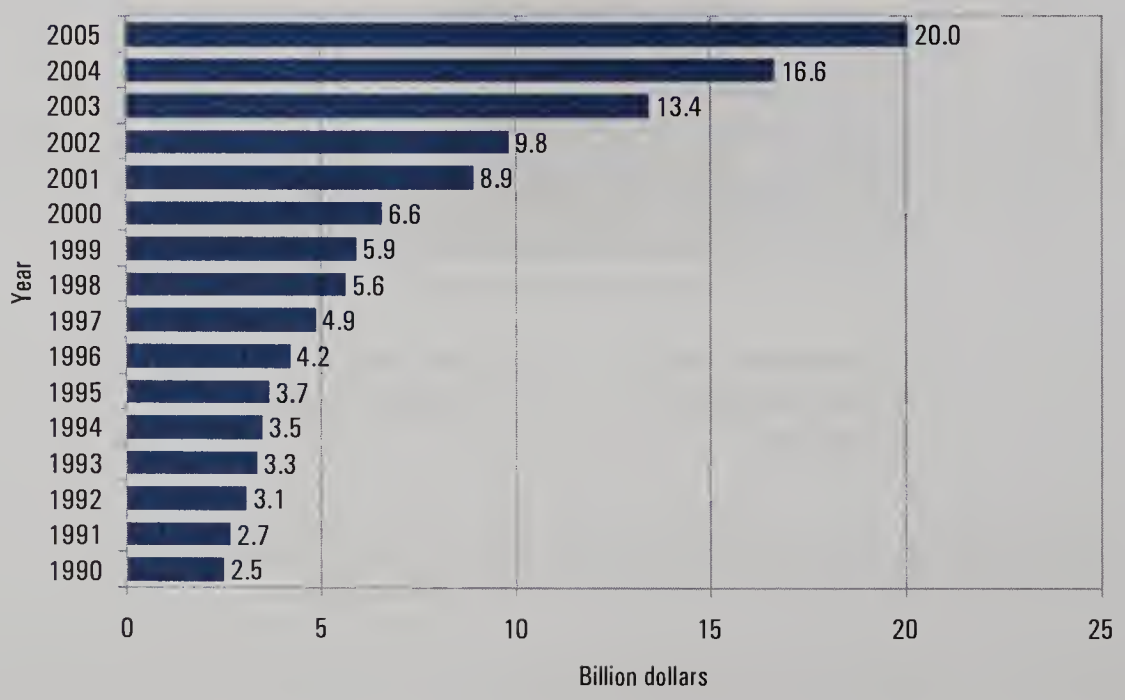
Figure 1.14 Distribution of Migrants by Whether they Send Remittances to Relatives in Mexico and Frequency



Source: Estimates based on Pew Hispanic Center, Institute of Mexicans Abroad, and University of Southern California. Survey of Mexican Migrants, July 2004-January 2005.

In Mexico, the value of all remittances has grown rapidly and reached unprecedented levels; remittances are now one of the three main sources of foreign currency in the country. According to estimates by Banco de México, the amount of remittances increased eightfold in 15 years, from $2.5 billion USD in 1990 to $20 billion USD in 2005 (Figure 15).

Figure 1.15 Value of Remittances Sent to Mexico, 1990-2005



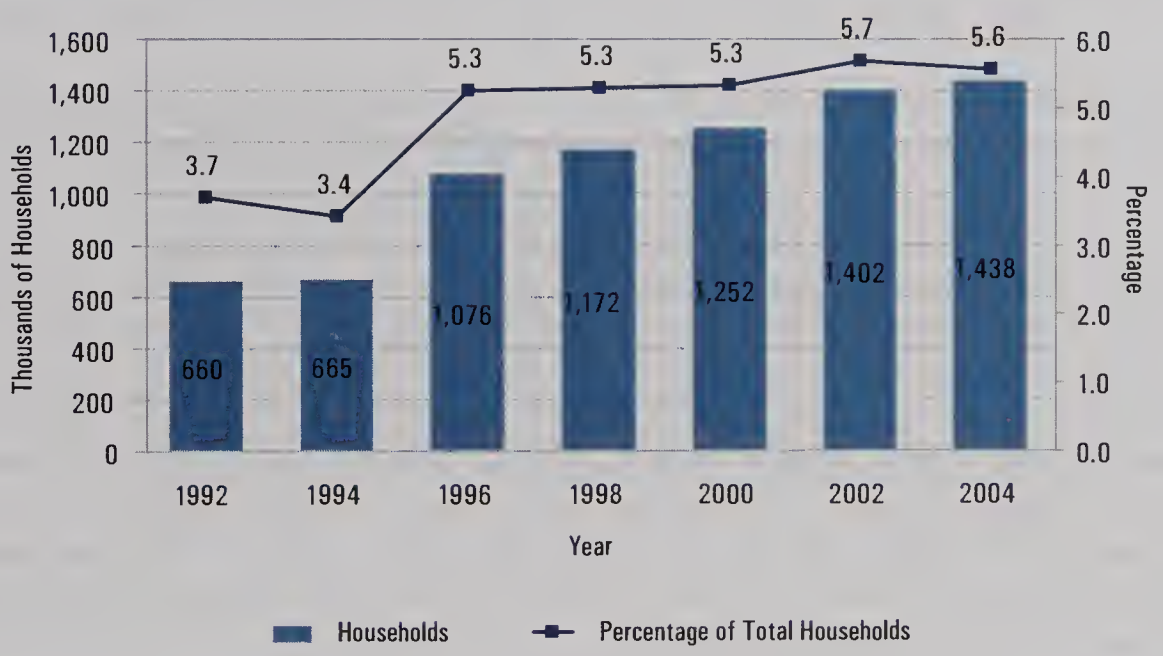
Source: Based on data from Banco de México, web site: www.banxico.org.mx.

Remittances in Households and Expenditures on Health

The increased flow of remittances may be partly accounted for by the significant improvements in data collection made by Banco de México. Official estimates are still flawed, however, due to possible omissions of certain areas, particularly transfers made through informal channels. At the same time, they run a high risk of overestimating figures, since they capture monetary transfers between private individuals that do not necessarily correspond to immigrants and their families.

Based on information provided by receiving households, the remittances' total value is considerably lower. Based on the National Household Income and Expenditure Survey (ENIGH), the value of remittances is estimated to have tripled between 1992 and 2004 ($1.4 billion USD to $4.2 billion USD).[11] During this period, the number of households receiving remittances rose from 660,000 to 1,438,000, accounting for 5.6% of the country's households and 5.9 million people in 2004 (Figure 16).

Figure 1.16 Households Receiving Remittances in Mexico, 1992-2004



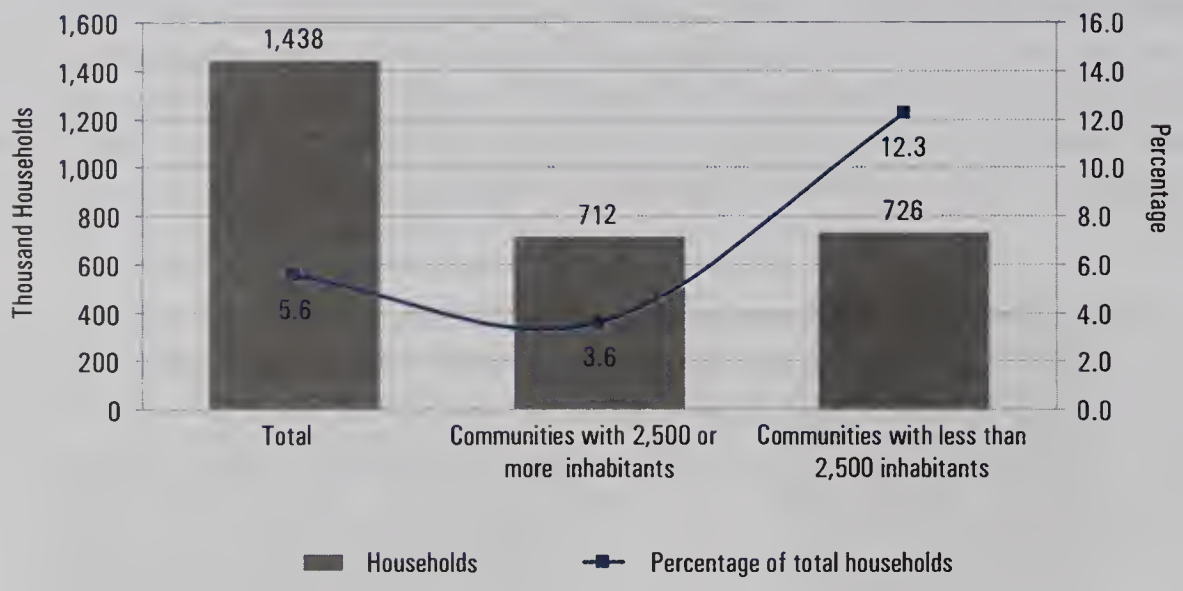
Source: Estimates based on INEGI National Household Income and Expenditure Survey, (ENIGH), 1992, 1994, 1996, 1998, 2000, 2002 and 2004.

About half the households receiving remittances (approximately 726,000) are located in rural communities (those that have less than 2,500 inhabitants). These households account for 12.3% of rural households. Although communities with 2,500 or more inhabitants have somewhat fewer households that receive remittances (712,000), their relative importance is significantly lower (since they represent only 3.6% of the total number of households in urban contexts) (Figure 17).

Money transfers from immigrants to their relatives in Mexico constitute an essential component of the upkeep of the households that receive them; they account for nearly half of their income (43.6%). For one of every five recipient households in Mexico, the remittances constitute their only source of income, which makes them vulnerable to any interruption in the flow of these monetary resources.

[11] This project was undertaken by Mexico's National Institute of Statistics, Geography and Information (INEGI). The survey has national representativeness. It began in 1992, on a two-year basis.

Figure 1.17 Number of Households Receiving Remittances By Size of the Community of Residence, 2004

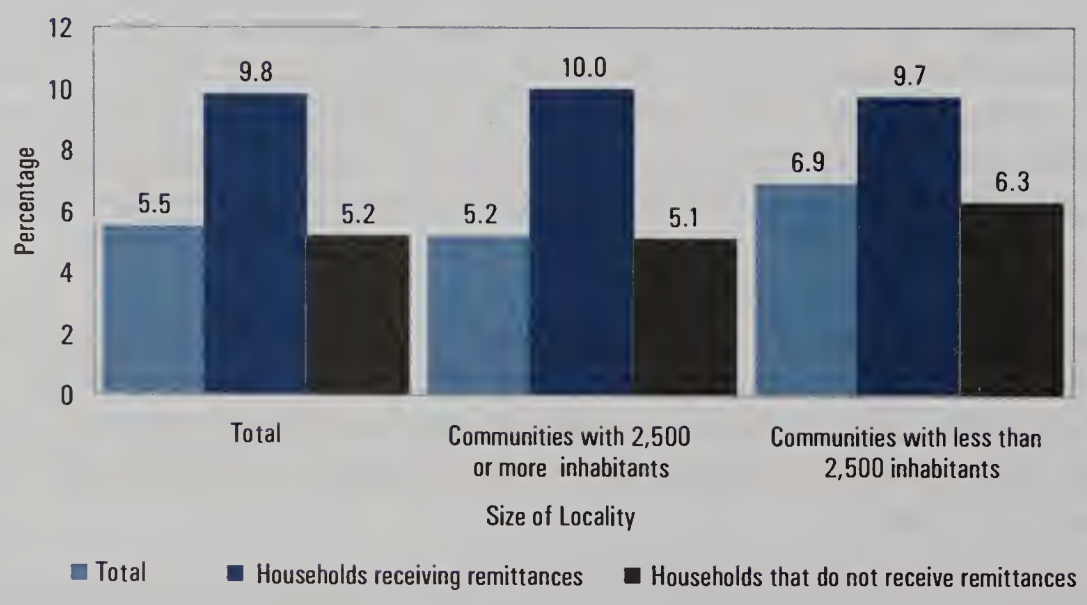


Source: Estimates based on INEGI, National Household Income and Expenditure Survey. 2004.

Most of the income from remittances is used to satisfy basic needs, such as food and clothes, as well as other expenses that constitute investment in human capital such as education and health.

Although it is difficult to determine the percentage of monetary transfers used for health expenses, there is evidence that remittances are encouraging greater expenditure on treating illnesses and meeting other health needs. Households that receive remittances spend an average of about 50% more financial resources on covering health expenses than households that do not receive any (an annual average of 1,683 as opposed to 1,103 pesos). These amounts account for 8% of the total expenditure of households that receive remittances, almost twice the percentage spent by households that do not receive remittances (4.2%). Health expenditures in households receiving remittances account for a fifth of the total received by these family units through these monetary transfers (Figure 18).

Figure 1.18 Percentage of Health Expenditure Relative to the Total Monetary Expenditure by Whether or Not a Person Receives Remittances and Community Size, Mexico, 2004



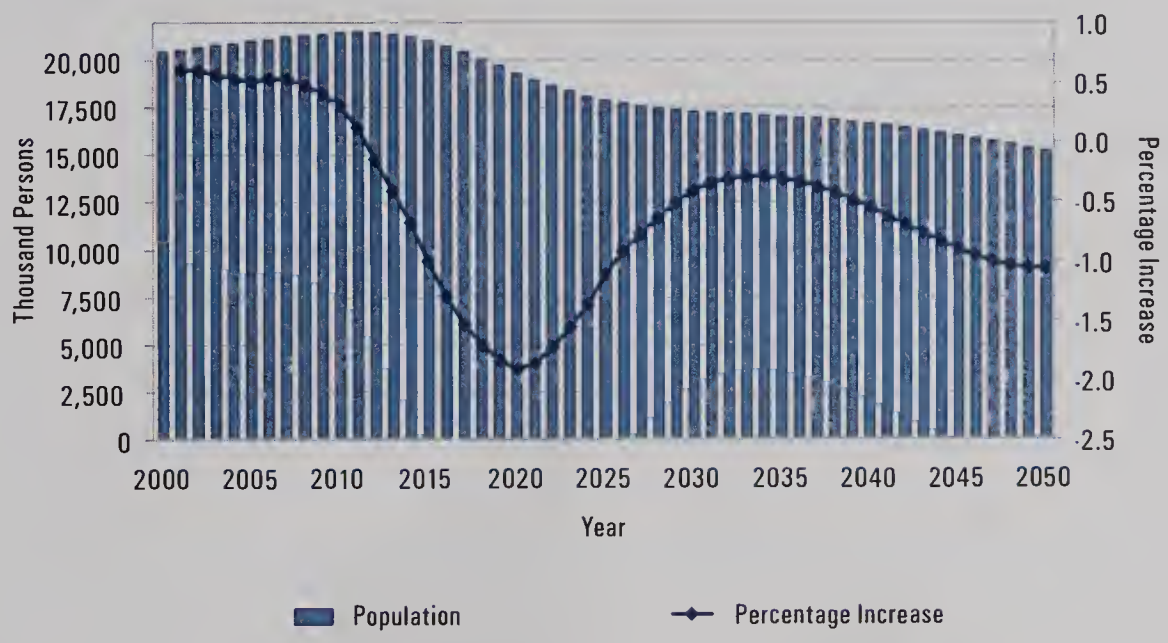
Source: Estimates based on INEGI, National Household Income and Expenditure Survey. 2004.

Projections and Future Scenarios

In a context of globalization, which encourages international population mobility, together with the enormous asymmetries, interdependence, and complementarity between the Mexican and U.S. economies, migratory flows can be expected to be a constant in the future of both nations. Nevertheless, there is unlikely to be a continuation of the spectacular growth of the Mexican immigrant population in the U.S. that has taken place during the last three decades of the last century.

This statement is partly based on the fact that Mexico is now at an advanced state of its demographic transition, with declining population growth rates. The current growth level is nearly 70% lower than it was 35 years ago (1.1% in 2005 versus 3.4% in 1970). The demographic pressures that favored the rapid rise of emigration will begin to decline sharply from 2010 onward. Beginning in 2010, the absolute number of young people reaching the age for entering the labor market (15 to 24) will begin to fall, a decline that will continue for the foreseeable future (Figure 19).

Figure 1.19 Mexico: Projection of Population Ages 15 to 24 Sex and Age, 2000-2050



Source: Estimates based on CONAPO (2002), Proyecciones de la Población 2000-2050.

Forecasts by Mexico's National Population Council (CONAPO), based on statistical models, permit the construction of possible trajectories of future immigration to the U.S. One of these scenarios assumes constant migration rates from Mexico until 2030. If this were the case, one could expect that Mexican-born population resident in the U.S. will reach 15.9 million in 2020 and 18.7 million in 2030.

Forecasts that include more-complex assumptions about the behavior of economic variables (such as the evolution of the GDP, wage gaps, and unemployment rates in both countries) as well as other social dimensions (such as the consolidation of family networks, measured through remittances) suggest that by 2030 the Mexican-born population resident in the U.S. could number between 18.3 million, in a positive economic scenario, and 22 million, in a more negative economic scenario.

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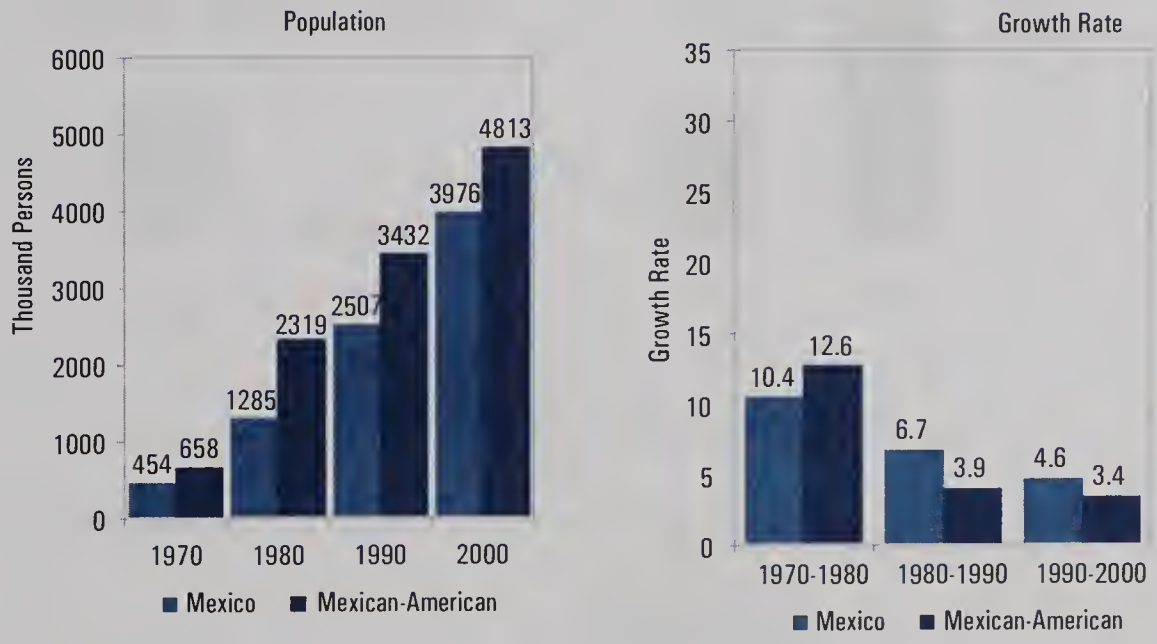
[12] Partido Virgilio (2006). Impacto demográfico de la migración de México a Estados Unidos. In Elena Zúñiga, J. Arroyo, et al. (coord.), Migración México-Estados Unidos. Implicaciones y retos para ambos países. CONAPO, UDG, CIESAS, EL COLMEX, and Casa Juan Pablos, Mexico.

California – The State with the Highest Concentration of Mexicans

California has long been the main destination of Mexican immigrants. During the 1970s, California's importance as a destination for Mexicans was documented by the fact that nearly six out of every 10 (58%) Mexican immigrants in the U.S. lived in the state—a figure that remained unchanged until 1990. Although Mexican immigration has spread across the U.S., California still takes in by far the largest number and is currently home to two-fifths of the nation's Mexican immigrants (43% in 2000).

Between 1970 and 2000, California saw a ninefold increase in Mexican-born residents, from 454,000 to nearly four million. The U.S.-born Mexican-American population also grew considerably, from 658,000 in 1970 to 4.8 million in 2000 (Figure 1).

Figure 2.1 California: Growth Rate of Mexican Immigrant and Mexican-American Population, 1970-2000



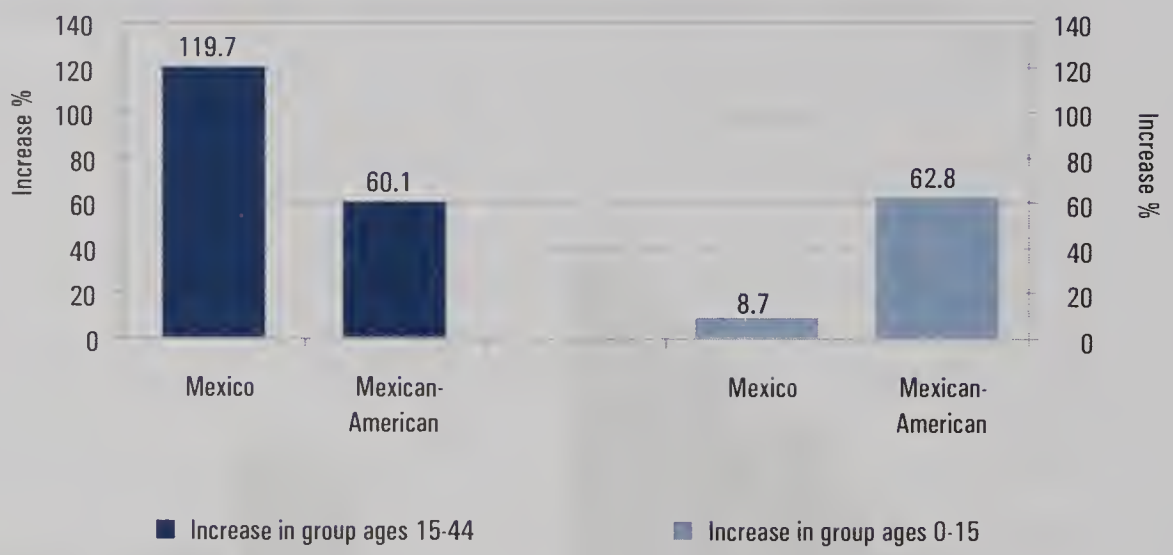
Source: Estimates based on U.S. Census Bureau, 15-percent sample 1970, 5-percent sample 1980, 5-percent sample 1990 and 5-percent sample 2000.

Mexican Immigration Has Dramatically Reshaped California Demography

Mexican immigration has profoundly affected the size and structure of California's population. As California's population grew by 4.3 million between 1990 and 2000, the number of Mexican immigrants in the state grew by 1.4 million (35% of total growth) and the number of Mexican Americans grew by 1.3 million (33% of total growth). Given that Mexican immigrants are most commonly young adults, their effect on the 15-to-44 age group was even more significant. The increase in the number of Mexican immigrants in that age range represents around 120% of the total increase of the Californian population of 15- to 44-year-olds (Figure 2). This suggests that the number of young people in California's working-age population would have declined without the large influx of Mexican immigrants.

Since few Mexican immigrants are minor children, Mexican immigrants contributed only 9% of the increase between 1990 and 2000 in the 0-to-15 age group. The U.S.-born children of older immigrants, however, contributed significantly to the growth of the child population—63% of the growth in this age group was accounted for by the children of U.S.-born Mexican Americans (Figure 2).

Figure 2.2 Contribution of Mexicans and Mexican-Americans to the Population Growth in California ages 15 to 44 and 0 to 15, 1990-2000

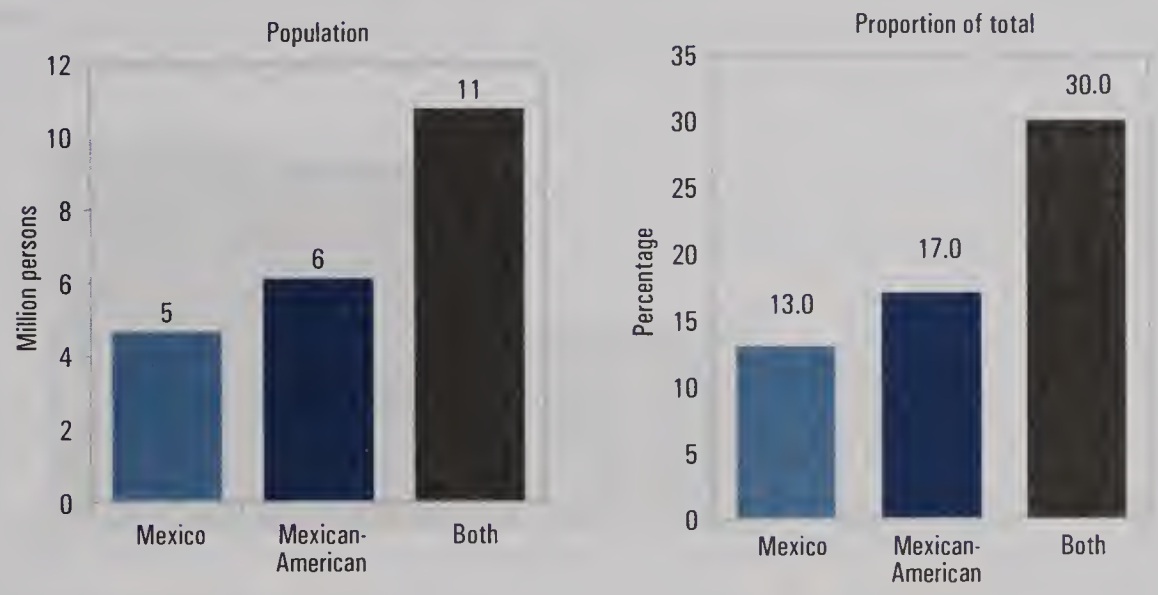


Source: Estimates based on U.S. Census Bureau. 15-percent sample 1970, 5-percent sample 1980, 5-percent sample 1990 and 5-percent sample 2000.

These demographic developments demonstrate that Mexican immigration has made a decisive contribution to reducing the average age of California's population by increasing size of the working-age population. The scale of Mexican immigration over the last 15 years constitutes, in effect, a response to the needs of the labor market and reduced the ratio between the dependent and the economically active population, which had been increasing.

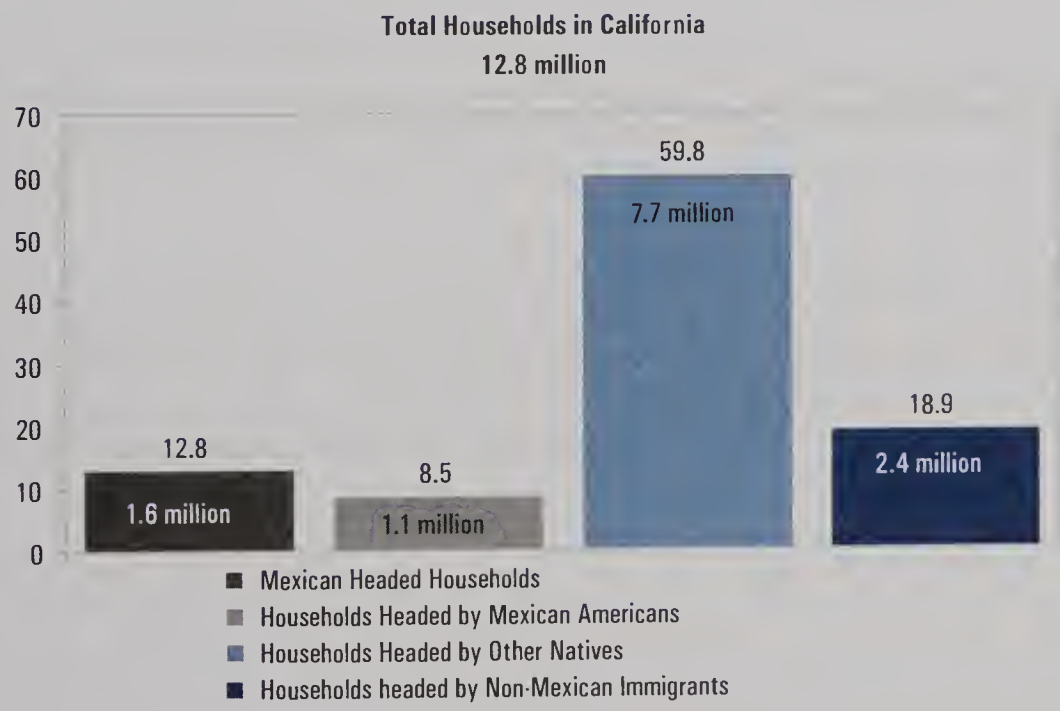
The 2005 Current Population Survey shows that California's Mexican-born population has reached about 4.7 million, equivalent to 45% of the immigrant population and 13% of the state's total population (Figure 3). The Mexican-born population has emerged as the main national group among immigrants, and the population of Mexican ancestry (Mexican-born and U.S.-born) as California's largest minority group. The Mexican-ancestry population now numbers 10.8 million, or 30% of California's population (Figure 3). California has 1.6 million households headed by Mexicans and 1.1 million headed by Mexican Americans—respectively 13% and 9% of households in the state (Figure 4).

Figure 2.3 Mexican-born and Mexican-American Population and Percentage of Total Population in California, 2005



Source: Estimates based on U.S. Census Bureau, Current Population Survey. March 2005.

Figure 2.4 California Households by Household Head's Country of Birth, 2005

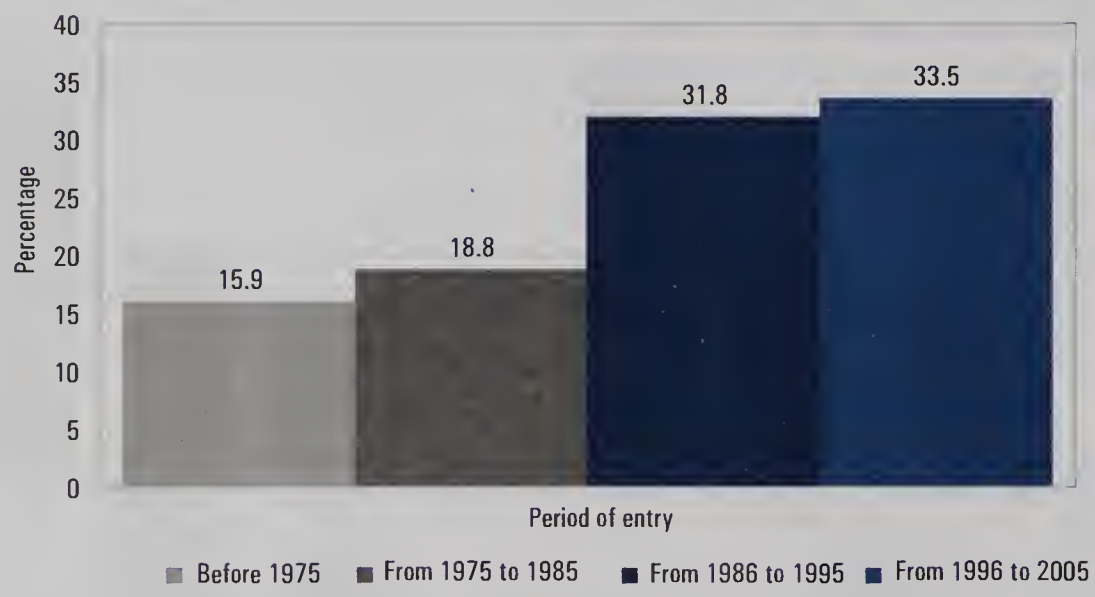


Source: Estimates based on U. S. Census Bureau. Current Population Survey. March. 2005.

Even though migration from Mexico has been particularly heavy during the past 10 years, nearly 35% of Mexican immigrants in California entered the U.S. over 20 years ago (Figure 5). This indicates that a substantial proportion of the Mexican immigrant community is comprised of people with long-term ties to the United States.

The long-standing nature of Mexican migration to the state of California, as well as its scale, has contributed to the political and social development of the Mexican community. The demographic and economic impact of Mexican immigration extend to both the communities where immigrants currently reside in California and the communities they came from in Mexico.

Figure 2.5 Mexico Immigrants in California by Period of Entry into the United States, 2005



Sourcee: Estimates based on U.S. Census Bureau. Current Population Survey. March 2005.

Medical Insurance Coverage of Mexican Immigrants in California and Nationwide

Access to health care, in the U.S. as elsewhere, is a key value. However, the growth of international migration, particularly undocumented migration, has created complex dilemmas and debates on the provision of and access to public services for immigrants. The trend in recent decades has been to pass increasingly restrictive laws about health insurance coverage for immigrants based on arguments regarding the possible impact of health insurance costs on public finances and as a means of restraining migratory flows and encouraging immigrants to return to their home countries.

The rapid growth of Mexican immigration over the past 25 years shows that these measures have not discouraged migration. They have, however, hampered immigrants' integration into their receiving communities.

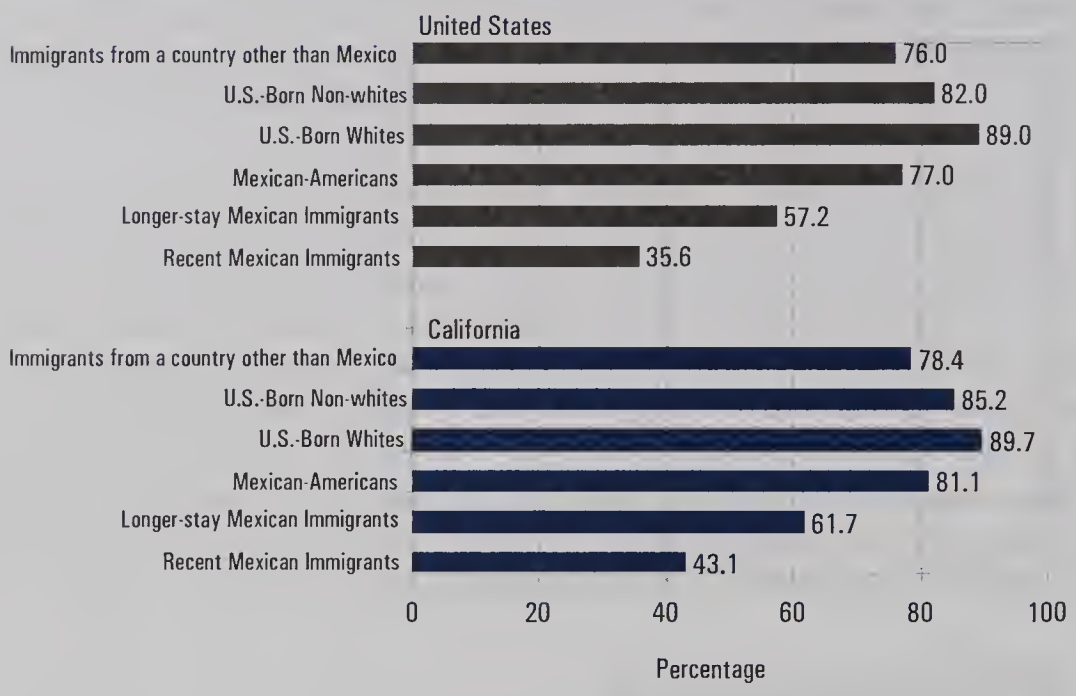
Most Mexican Immigrants Lack Medical Coverage

The U.S. health insurance system covers 84% of the resident population. Although the system is more accessible to the U.S.-born than to the immigrant population, in both cases there are sharp differences by race and place of origin. U.S.-born whites have the highest levels of medical coverage (89%), followed by U.S.-born non-whites (82%) and Mexican Americans (77%). The level of coverage for non-Mexican immigrants as a whole is very similar to that of U.S. citizens of Mexican descent, but non-Mexican immigrants have much higher rates of coverage than that of Mexican immigrants (Figure 1).

Most of the Mexican immigrant population lacks medical insurance. Among immigrants who entered the U.S. during the past decade, two out of every three lack this coverage, leaving 3.5 million people unprotected. Immigrants who have spent longer in the U.S. have significantly higher levels of coverage-nearly six out of every 10 (57.2%). Together, Mexican immigrants without medical insurance number 5.9 million, or 13% of all people in the U.S. who do not have this coverage.

In California, medical coverage is below the national average (81%). The state average is deceptive, however, since the medical insurance rate for each distinct population group is higher than the national average (Figure 1). This apparent contradiction is explained by the greater proportion of California's population constituted by immigrants, especially those of Mexican origin, and immigrants have the lowest rates of medical coverage.

Figure 3.1. Medical Insurance Rates. United States and California, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Unequal access to health insurance is somewhat less pronounced in California than in the country as a whole. While the gap is smaller in California between the health insurance rates for U.S.-born and immigrant residents, Mexican immigrants still fare poorly. Forty-three percent of recent Mexican immigrants and 62% of those who have been in the U.S. for more than 10 years have access to health services. Recent Mexican immigrants in California have a higher rate of medical coverage than do those nationally by 7 percentage points.

Despite this greater coverage of its Mexican immigrants, California faces the greatest challenges of any state. There are 2.1 million Mexican immigrants without medical insurance living in California, a third of all uninsured Mexican immigrants in the entire country.

Citizenship and Medical Coverage

Becoming a citizen is one of the events that best reflect the culmination of an immigrant's integration into the receiving society. Since citizenship eliminates barriers to exercising many of the rights the U.S.-born population enjoys, it is hardly surprising that among the foreign-born population, naturalized citizens should have the highest coverage levels.

Despite the United States' long tradition as a destination of Mexican migration, Mexicans' naturalization levels are the lowest of all immigrant groups in the U.S. Only 6% of the immigrants who arrived in the past 10 years and 34% of those who have spent more than 10 years in the country have acquired U.S. citizenship. Among the non-Mexican immigrant population, the percentage of citizens is 51% Roughly the same pattern holds true for California (Figure 2).

Figure 3.2. Percentage of Immigrants with U.S. Citizenship. United States and California 2005

Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Access to medical coverage increases significantly through the acquisition of citizenship. Nationwide, seven out of every 10 naturalized Mexicans receive coverage, as opposed to four out of every 10 noncitizens. In relation to the U.S.-born population and other naturalized immigrants, however, naturalized Mexicans still lag sharply behind, which is indicative of shortfalls in their social integration.

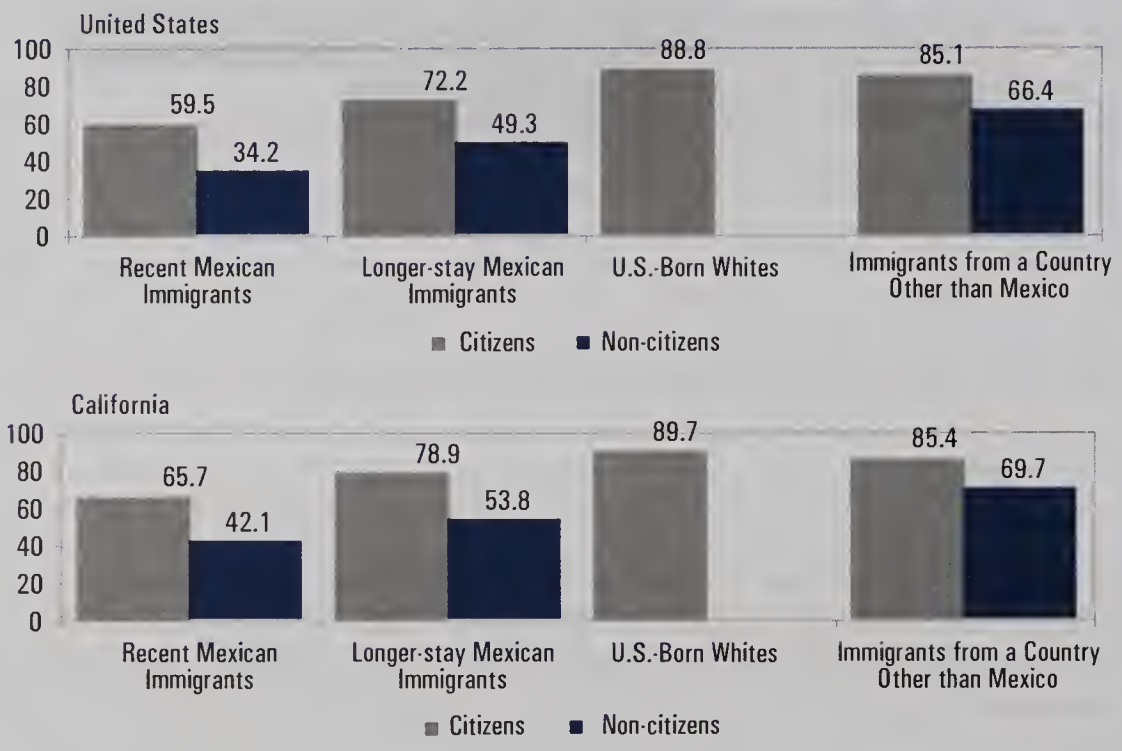
Even among immigrants who have acquired U.S. citizenship, greater length of stay in the United States promotes greater access to medical insurance. The difference in medical coverage between naturalized Mexicans in the U.S. for more than 10 years and recent arrivals is 12 percentage points (72% and 60%, respectively) (Figure 3). This difference is associated with the fact that fluency in English and better jobs are obtained with time and experience. It is worth noting, however, that the gaps in coverage level between Mexican immigrants and other immigrants persist even when only groups of citizens are considered. These results underscore the need to implement policies and programs designed to accelerate and improve the social integration of Mexican immigrants.

Noncitizen Mexican immigrants include those who do not have documents for living or working in the United States. An undocumented status restricts access to medical insurance due to the fact that undocumented immigrants are excluded from public benefits and are placed at an enormous disadvantage regarding their labor rights.

Despite the high indices of Mexican immigrant participation (both documented and undocumented) in the U.S. economy, only 34% of recently arrived Mexican noncitizens and 49% of those who have lived in the country longer have medical coverage (Figure 3).

Nevertheless, the percentage of Mexican immigrants in California who have not been naturalized (particularly those who arrived recently and are extremely likely to be undocumented) is higher than that of their national counterparts by 8 percentage points (42%) (Figure 3). This suggests that California has a system of social benefits that is better at incorporating the more vulnerable immigrant population, including recent arrivals, who are not citizens.

Figure 3.3. Medical Insurance Rates by Citizenship Status United States and California, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Public and Private Medical Insurance Among the Mexican-Origin Population

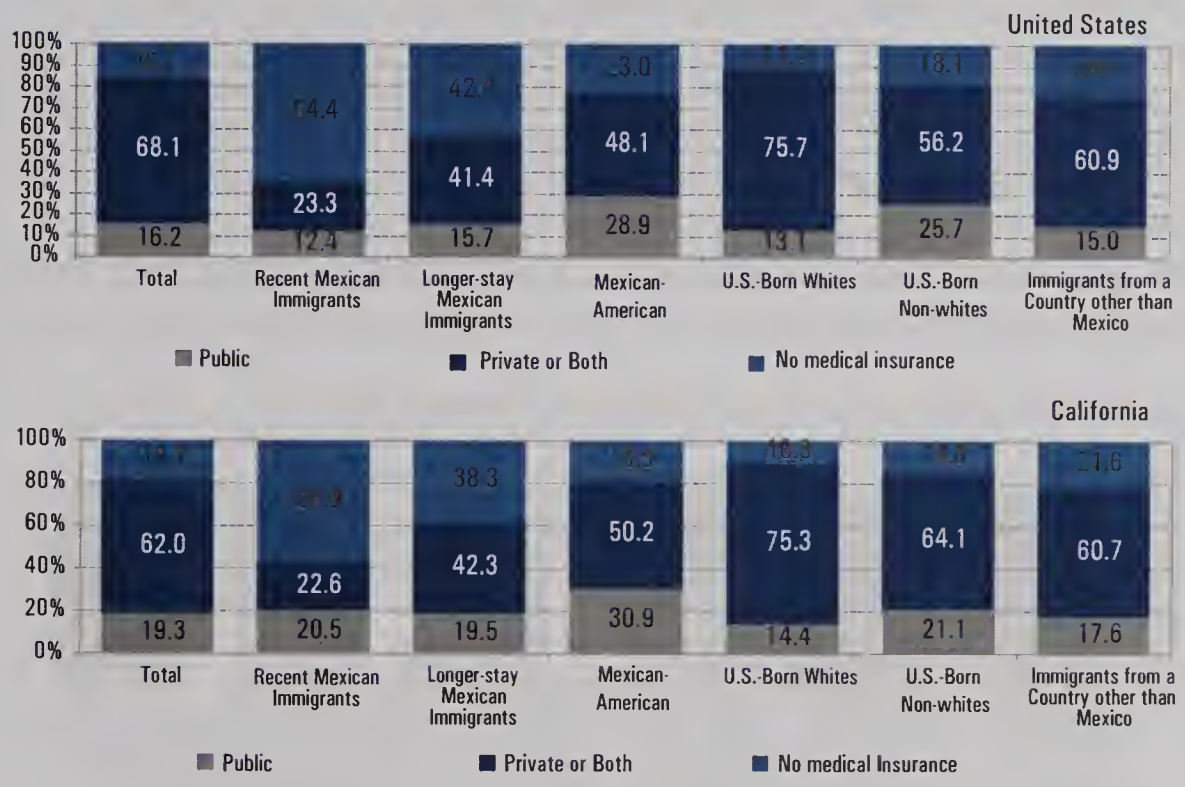
Private medical insurance is the main insurance system in the United States. Nearly seven out of every 10 people have private medical insurance, as opposed to just over six of 10 in California (Figure 4).

The main way of gaining access to medical insurance in the U.S. health system is through employment-related private insurance. Public medical services are mainly oriented toward the most vulnerable groups, either because of their age or poverty and family status, among other criteria, through programs such as Medicare and Medicaid. Nationwide, only 16% of the resident population has public medical insurance, versus nearly 20% in California (Figure 4).

Across all groups, including Mexican immigrants, private insurance accounts by far for the largest number of people with medical coverage. Among Mexican immigrants, however, the percentages of those with this type of insurance are extremely low in comparison with any other population group (Figure 4). Their low coverage levels can be said to be primarily due to their extremely limited access to private insurance.

Mexican immigrants, both those that have recently arrived and those that have been in the country longer, receive public insurance at similar rates nationally as the overall population (12.4% and 15.7% of Mexican immigrants, respectively, versus 16.2% of the population nationwide). However, there are large differences between Mexican immigrants and the total population with regard to access to private insurance, with only two-fifths of long-stay Mexican immigrants and one-fifth of recent Mexican immigrants holding private insurance compared to two-thirds of the total population (23% and 41% compared to 68%) (Figure 4).

Figure 3.4. Type of Medical Insurance United States and California, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

The profound inequality in private medical insurance coverage affecting Mexican immigrants reflects how they enter the labor market. Both groups, but particularly new immigrants (because many are undocumented), are forced to take jobs in industries that often do not provide health insurance.

In California, the access that different population groups have to public and private medical insurance follows a pattern similar to the nationwide trend (Figure 4). It is different, however, in that it affords Mexican immigrants greater protection within the public medical insurance system. In fact, in California one out of every five Mexican immigrants has access to public medical insurance, compared with the national figure (under 16% for recently arrived Mexicans and those with longer residence).

In the U.S. , public medical insurance is more commonly received by immigrants' offspring. Data indicate that U.S.-born nonwhites and Mexican Americans are the ones who obtain public medical insurance most often.

In California, nearly one out of every three Mexican Americans has access to public health services (Figure 4). This high percentage, by far the highest among all the populations analyzed, is partly explained by the Mexican-American population profile. It is an extremely young population-55%

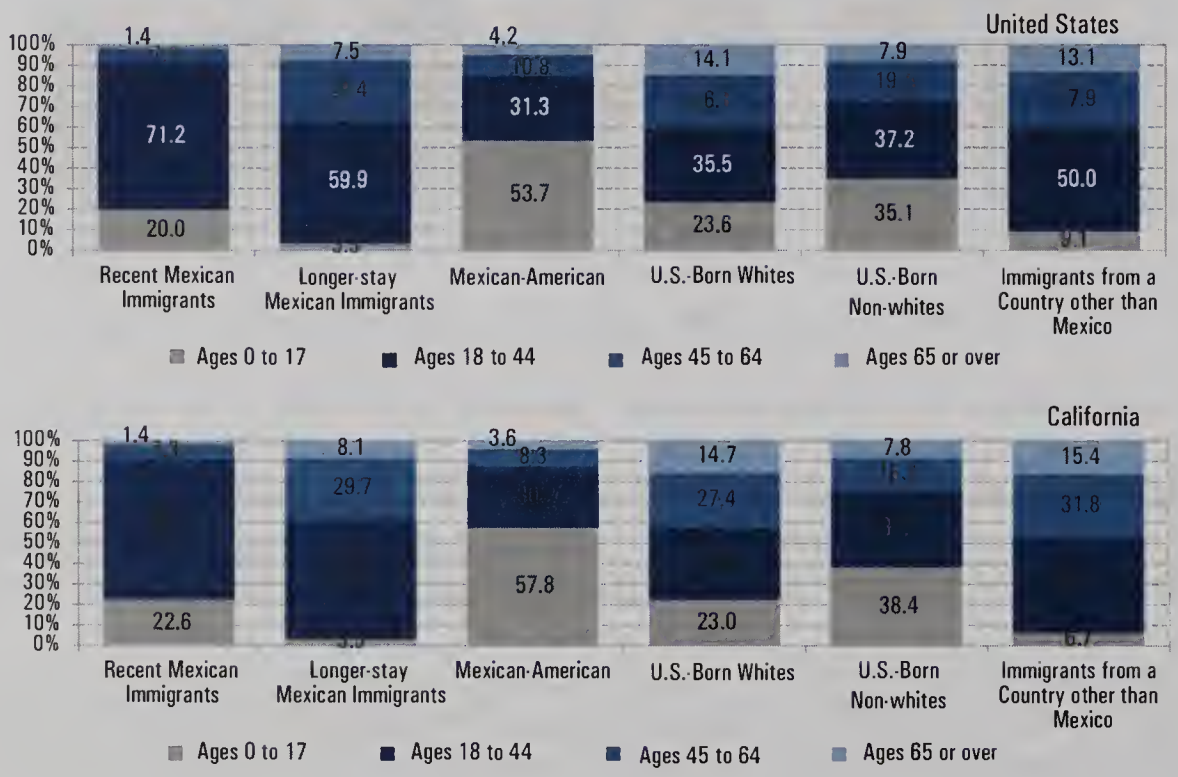
are under 18. For most, their parents (who are often Mexican immigrants) do not have private medical insurance, and they generally come from low-income families, making them more likely to meet the eligibility criteria of the California public health system. However other mechanisms promote and facilitate their access to medical insurance, as a result of their political and economic importance in the state, which is closely linked to their numerical importance: Just under one out of every six inhabitants in California is Mexican American, a proportion that rises to one out of every three among those under 18.

The Population at Either End of the Age Structure Shows the Highest Medical Coverage-Except for Mexicans

The Mexican immigrant population in the United States is characterized by its high labor-force participation rate. Over 70% of recent immigrants and 60% of those who have been in the country longer are in the prime working ages of 18 to 44 (Figure 5).

The age composition of Mexican immigrants in California follows the national pattern, with a slightly higher percentage of people under 18 among recent immigrants, who account for ap-

Figure 3.5. Distribution by Age GroupUnited States and California, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

proximately a fifth of the whole. Mexican immigrants who have spent longer time in the U.S. have a slightly older age profile, due to the scant presence of children (less than 4%) and a greater concentration of 45- to 64-year-olds (30%) (Figure 5).

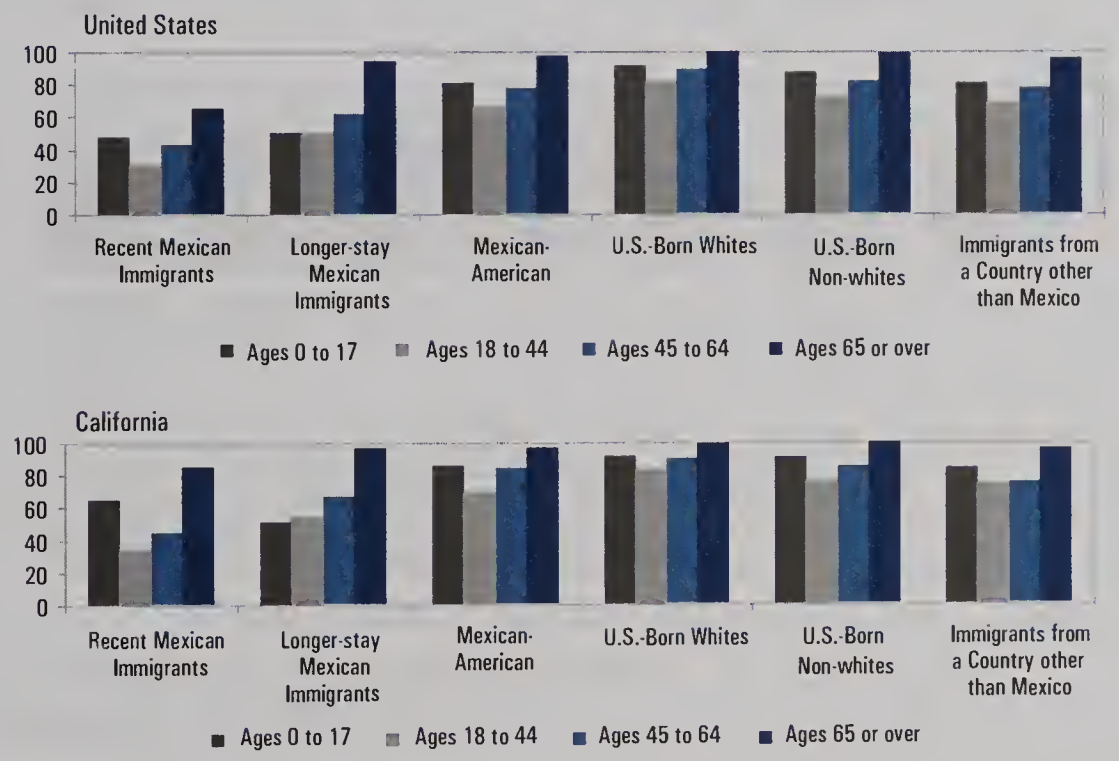
At the other end of the population pyramid, immigrants over 65 account for a minimal portion of the Mexican population: 1.4% among recent arrivals and approximately 8% among those with longer residence in the country (Figure 5).

Among the U.S. population as a whole, access to medical insurance varies significantly from age group to age group. People 65 and older and children have the highest medical insurance rates (99% and 89%, respectively), while young adults (age 18 to 44) (76%) have the lowest levels, followed by adults age 45 to 64 (86%).

With the exception of Mexican immigrants, this pattern is repeated in all the populations analyzed, with greater medical coverage among the oldest and youngest, although with sharp differences in the actual level. Public insurance resources primarily target these groups, in order to offset their lower access to private insurance due to the fact that they are not economically active, and to attend to the population whose health is most vulnerable.

Among the Mexican-immigrant population, however, the lowest medical insurance rates are to be found among young adults (40%) and among children and teenagers (49%). Among all the age groups, Mexican immigrants' medical coverage is 30 to 40 percentage points lower than that of U.S.-born whites, with the exception of adults over 65, where the gap is 11 percentage points (Figure 6).

Figure 3.6. Medical Insurance by Age Group United States California, 2005



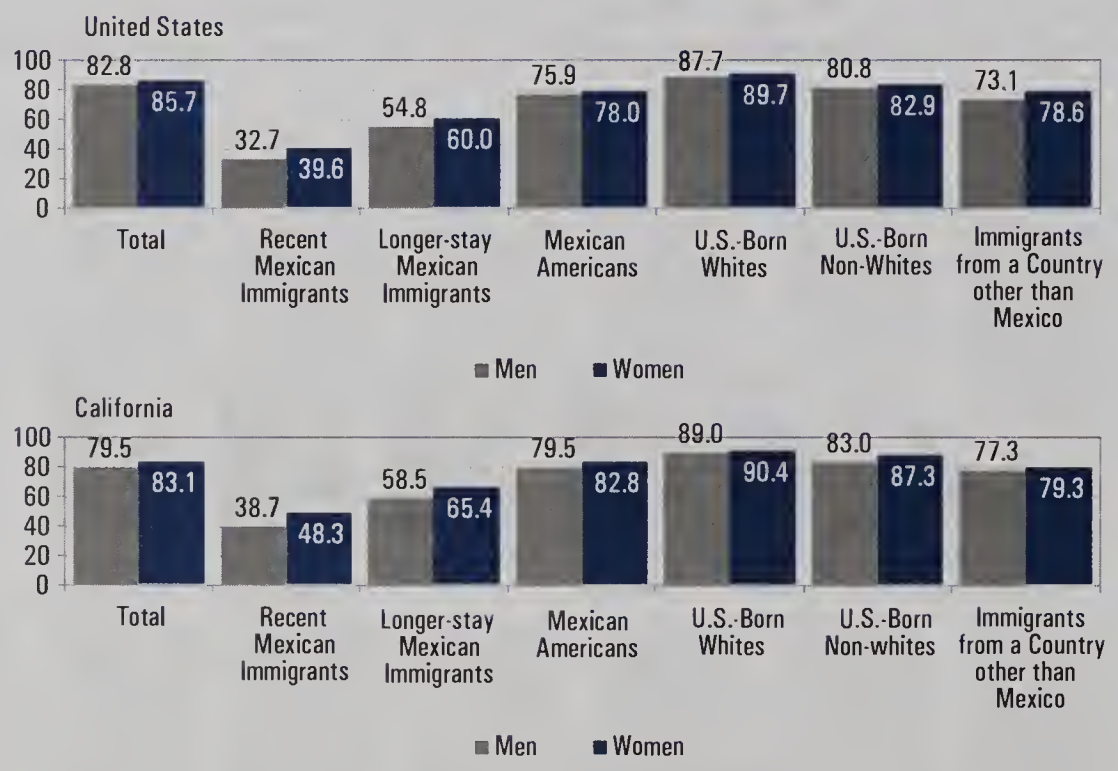
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

In California, medical insurance rates among the various population groups follow the national pattern, although for each the coverage level is higher (Figure 6). Particularly striking is the case of Mexican children and teenagers, whose medical insurance rate (63%) is 13 points higher than the national average for the same group. Moreover, the inequality in medical protection between immigrant groups and the U.S.-born population is less in California than in the country as a whole. Coverage for older Mexicans (95%) is similar to that of other immigrant groups.

Women Are More Likely to Have Medical Insurance Than Men

Women have greater medical coverage than men. Nationwide, 86% of women have insurance as opposed to 83% of men, whereas in California the respective percentages are 83% and 80%. This ratio is maintained across population groups (Figure 7).

Figure 3.7. Medical Insurance Rates by Sex, United States and California, 2005

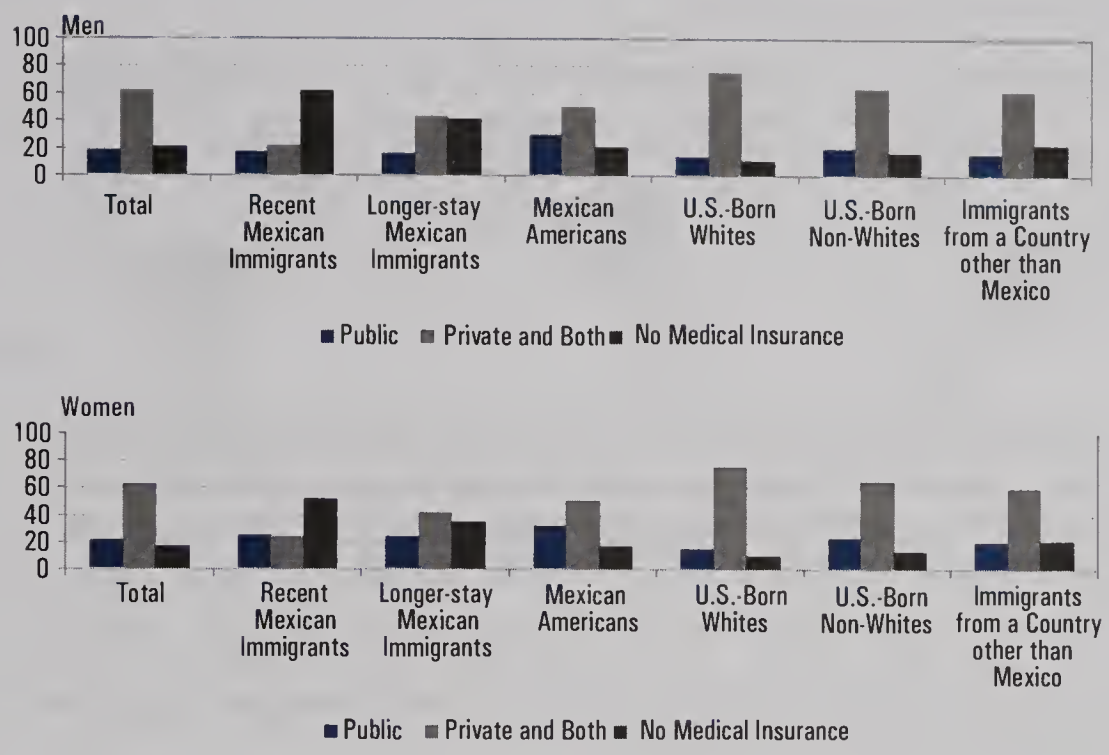


Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Among Mexican immigrants, the difference by sex is more pronounced (and among recent Mexican immigrants in California the coverage difference is nearly 10 percentage points). This pattern holds true as well for Mexican immigrant women and men who have lived for more than 10 years in the United States: Nationwide, the percentage of women with medical insurance is five percentage points higher than that of men; in California, almost seven (Figure 7).

Women's higher medical insurance coverage is due to their greater access to public insurance. For nonelderly adults, public health insurance is generally available only to parents of minor children who live in poverty and to the disabled. Public insurance is nearly universal among the elderly. In both groups, low-income families and the elderly, women outnumber men, resulting in

Figure 3.8. California: Medical Insurance Rates by Sex, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

their higher coverage rates. Mexican immigrant women in California have public insurance coverage levels similar to those for Mexican children and teenagers.(Figure 7 and figure 8).

The large presence of first-, second-, and third-generation Mexicans in California; the state's long tradition as a destination for Mexican immigrants; and the economic importance and the degree of development achieved by Mexican immigrants' organizations-these, among many other factors, have undoubtedly offset the various attempts to reduce immigrants' access to health services.

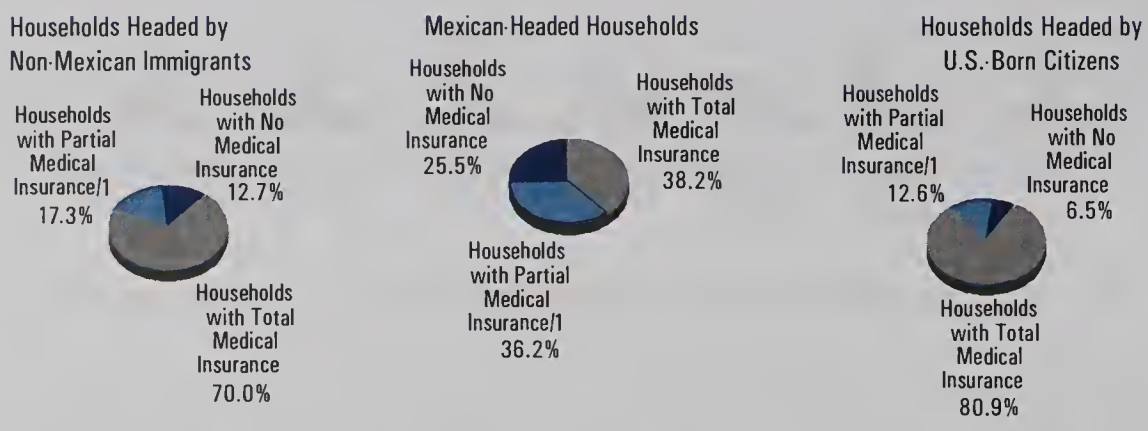
It is worth noting, however, that the state lags far behind with regard to medical coverage of the immigrant population. It is estimated that in early 2005 there were just over 980,000 Mexican women in California without any form of medical insurance, accounting for 29% of the total number of women in this situation. Mexican men are even more disadvantage: 1.2 million lack medical insurance, meaning that one out of every three men without medical insurance in California is a Mexican immigrant.

Medical Coverage and Household Structure Among the Immigrant Population

Medical insurance plans tend to consider families rather than individuals as a unit of attention, in response to people's interest in looking after the health of all family members. One approach to this unit of analysis is the household, which, for analytical purposes, is classified according to the country of origin of the household head in three categories: Mexican immigrants, other immigrants, and the U.S.-born population.

In the United States, there are 113.3 million households, 4.0 million of which (3.6%) are headed by first-generation Mexicans. Data suggest a broad difference in household members' access to health services depending on the migratory status of the household head. Whereas in eight out of every 10 households among the U.S.-born all members have medical coverage, this is true of only four out of every 10 with a Mexican household head. In fact, in 25% of Mexican-headed house-

Figure 3.9. United States: Distribution of Immigrant Households (Mexican and Non- Mexican) and American by Medical Insurance, 2005


Households Headed by Non-Mexican Immigrants
Households with Partial Medical Insurance/1 17.3%
Households with No Medical Insurance 12.7%
Households with Total Medical Insurance 70.0%
Mexican-Headed Households
Households with No Medical Insurance 25.5%
Households with Total Medical Insurance 38.2%
Households with Partial Medical Insurance/1 36.2%
Households Headed by U.S.-Born Citizens
Households with Partial Medical Insurance/1 12.6%
Households with No Medical Insurance 6.5%
Households with Total Medical Insurance 80.9%

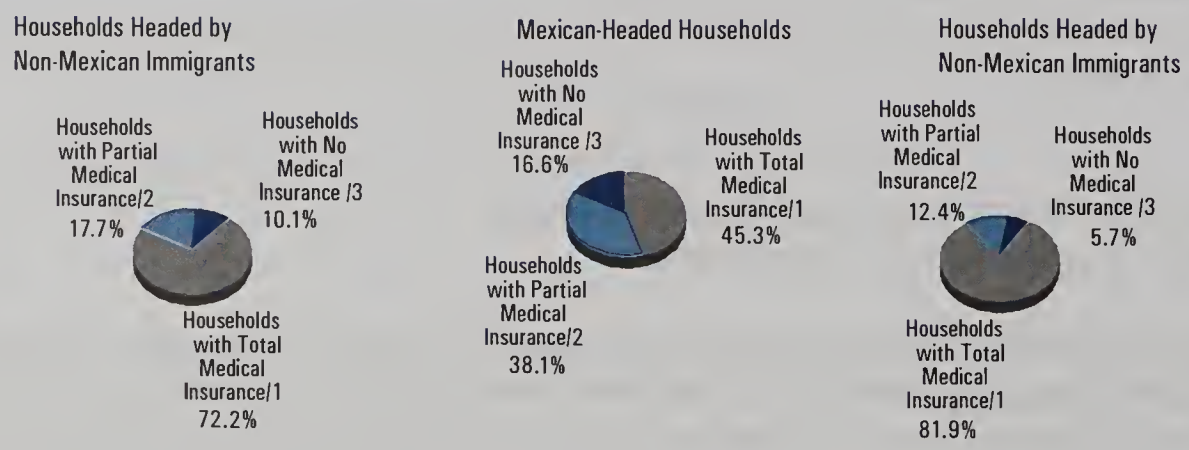
1/ At least one member of the household has medical insurance and other doesn't.
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

holds, no household member has medical insurance, whereas in households headed by someone U.S.-born, this figure is less than 7% (Figure 9).

Household medical coverage in California is slightly better than the national average, due, among other things, to the fact that Mexican immigrants in the state have greater access to public insurance. Most households, however, have a situation of mixed coverage (38%) or no coverage (17%) (Figure 10).

The unequal access to medical insurance observed within Mexican immigrant households is closely linked to the coexistence of undocumented immigrants and citizens or legal residents within the same household. In this type of household, the vulnerability of undocumented immigrants tends to spread to other household members, since they often avoid public health programs, despite meeting the requirements, for fear of jeopardizing the situation and stay of undocumented family members.

Figure 3.10. California: Distribution of Households of Immigrants (Mexican and Non- Mexican) and U.S.-Born Citizens by Medical Insurance, 2005


Households Headed by Non-Mexican Immigrants
Households with Partial Medical Insurance/2 17.7%
Households with No Medical Insurance /3 10.1%
Households with Total Medical Insurance/1 72.2%
Mexican-Headed Households
Households with No Medical Insurance /3 16.6%
Households with Total Medical Insurance/1 45.3%
Households with Partial Medical Insurance/2 38.1%
Households Headed by Non-Mexican Immigrants
Households with Partial Medical Insurance/2 12.4%
Households with No Medical Insurance /3 5.7%
Households with Total Medical Insurance/1 81.9%

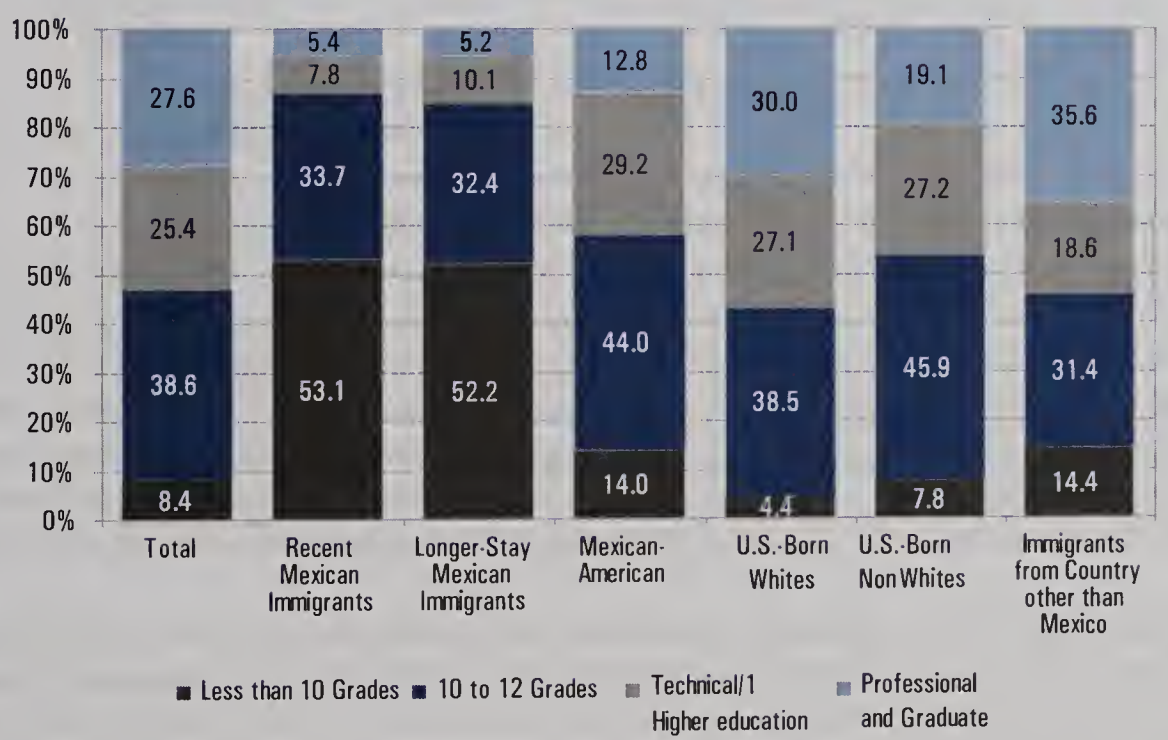
1/ All the minors are covered by some medical insurance system, private or public.
2/ No minor is covered by any medical insurance system, private or public.
3/ At least one minor is a beneficiary of a public medical assistance program or private medical insurance.
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Social Conditions and Health Insurance Coverage Among Mexican Immigrants in California and the U.S.

Education

In addition to being the largest immigrant group in the U.S., the Mexican immigrant community stands out as facing the most disadvantageous social conditions in American society, starting with its members' low levels of educational attainment. Over half of all Mexican immigrants 25 or over have less than 10 years of schooling, almost four times the percentage for other immigrant groups and Mexican Americans (14%) and 12 times that of U.S.-born whites (4.4%) (Figure 1). Compounded by the consequences of undocumented status, this disadvantage confines them to the bottom of the occupational hierarchy in U.S. society, with low wages and employment benefits as a result.

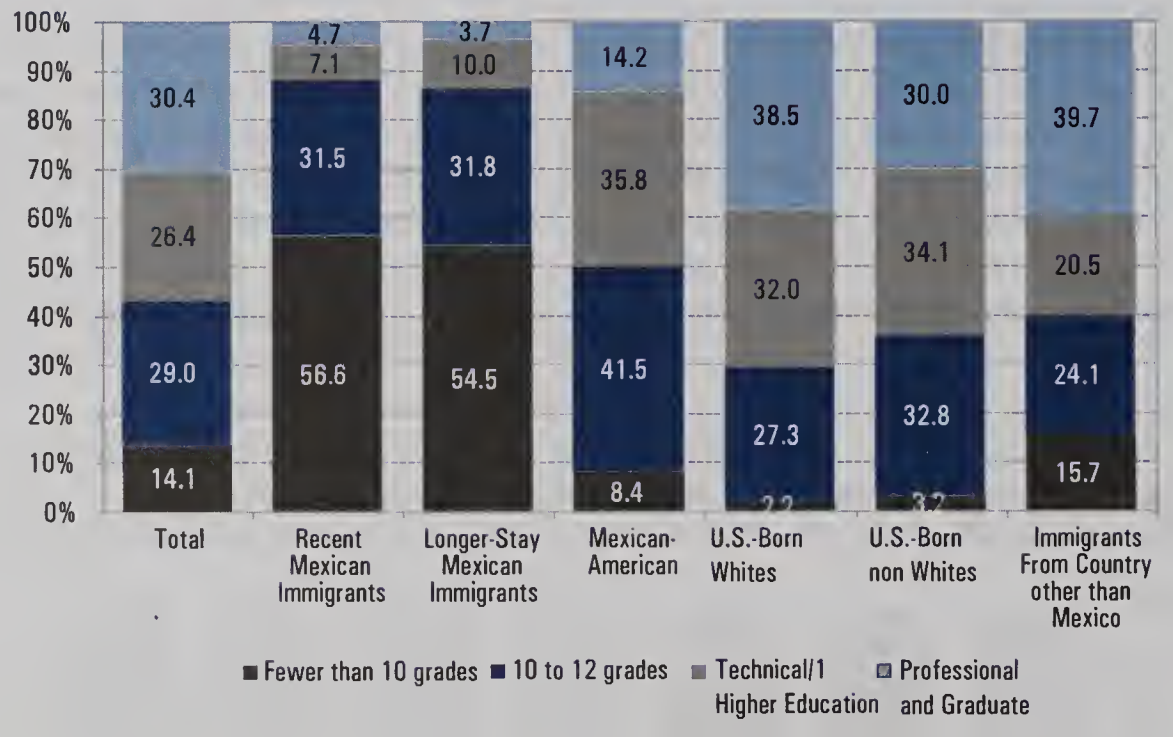
Figure 4.1 Population Aged 25 or Over Resident in the United States by Educational Attainment, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

In California the differentials in educational attainment between immigrant groups and the U.S.-born population are even more pronounced. There the percentage of newly arrived Mexicans (entering in the last 10 years) with less than 10 years of schooling (56.6%) is almost 26 times higher than that for the American-born white population (2.2%). Although the offspring of U.S.-born Mexicans have far higher levels of educational attainment than their Mexican immigrant counterparts, only a minority manage to pursue or complete professional or higher studies (14.2%) (Figure 2).

Figure 4.2 California: Population Aged 25 or Over Resident in the United States by Educational Attainment, 20052005

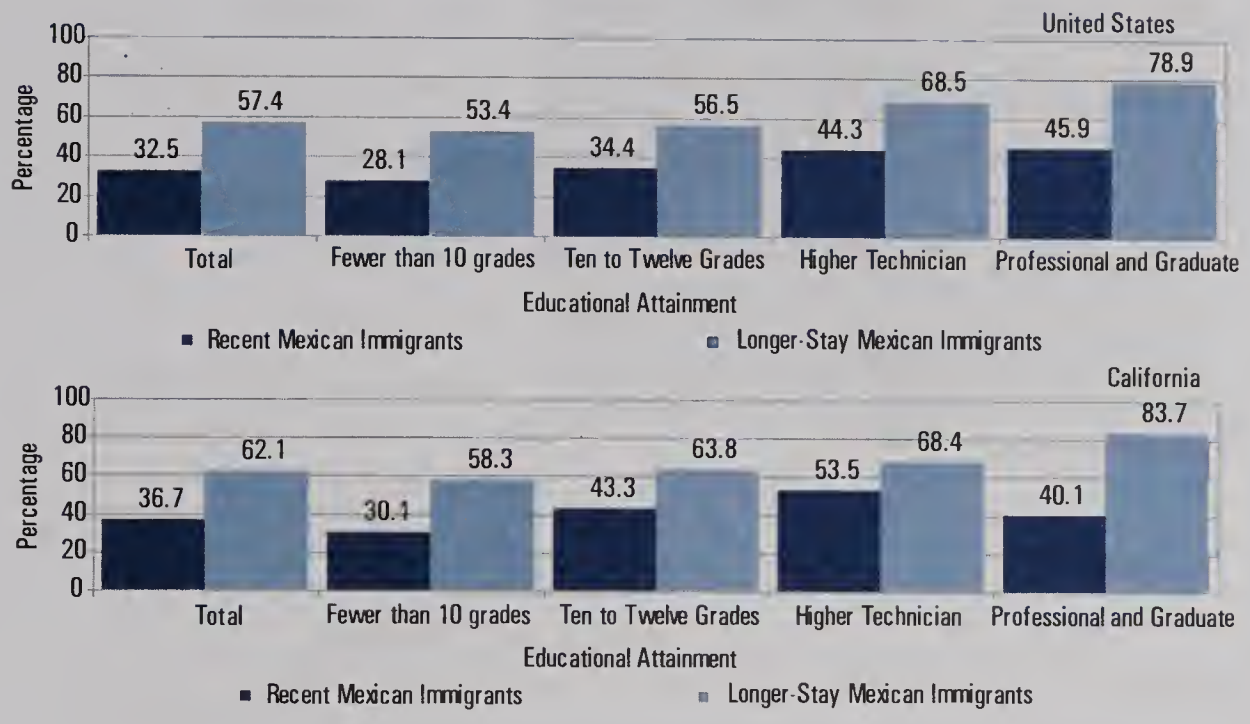


Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Immigrants of other nationalities have a somewhat polarized educational status. Four out of 10 have professional degrees, while a similar proportion have completed twelfth grade or less. The educational distribution of other U.S.-born minorities resembles that of the native-born white population, and although they continue to lag somewhat behind that group, in California the differences between them are significantly lower than those observed in the country as a whole.

In the U.S., education is closely linked to position in the job hierarchy and to social stratification, linked in turn to the quality of wages and benefits. The higher the level of educational attainment, the greater the medical coverage. Among recent Mexican immigrants, however, more than half of even those with professional degrees lack health insurance. In contrast, among long-stay immigrants (those who have already resided in the U.S. for more than 10 years), coverage exceeds 50% in all cases, reaching 78.9% among the most highly educated (Figure 3). It is also worth noting that compared to others with the same level of educational attainment, long-stay Mexican immigrants' coverage is 9 percentage points lower than among Mexican Americans and 15 percentage points lower than among U.S.-born whites.

Figure 4.3 Mexican Immigrants Aged 18 or Over with Medical Insurance (public or private) by Educational Attainment and Length of Stay in the United States, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

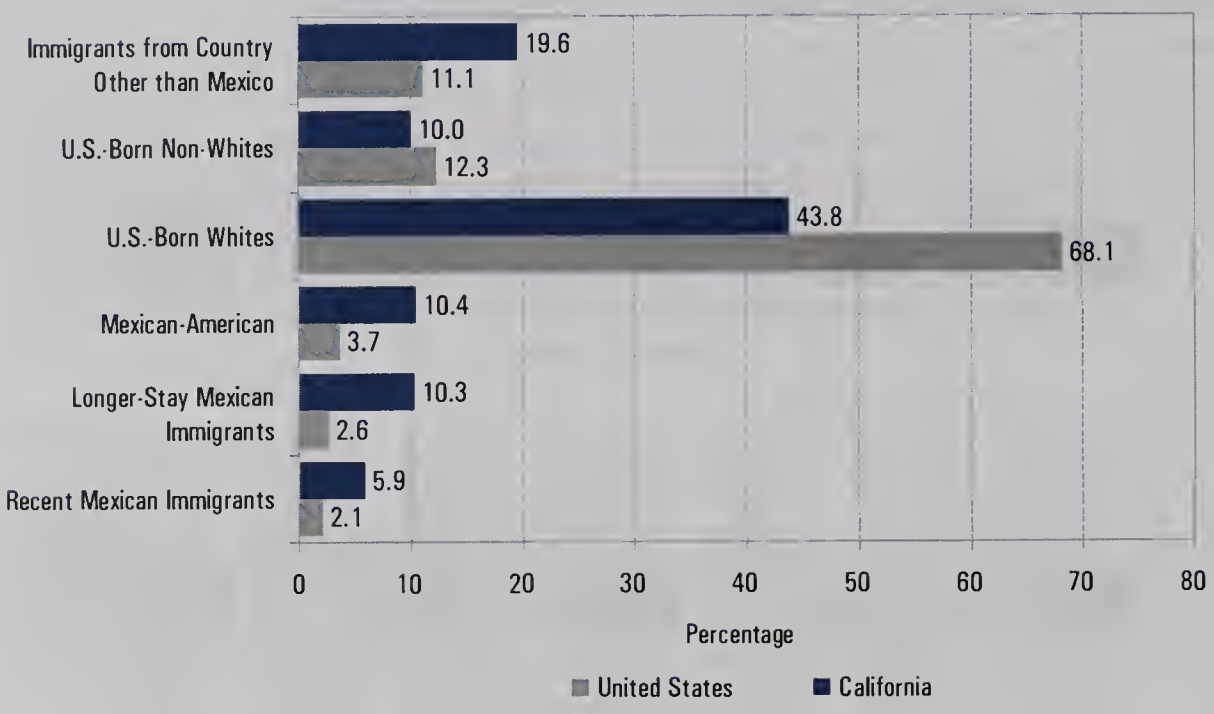
Labor-Force Participation

California's multi-ethnic and multicultural nature is reflected in the composition of the working population. Unlike the U.S. as a whole, where nearly seven out of 10 people in the labor force are U.S.-born whites, in California this proportion is only four out of every 10. Ethnic minorities, particularly the immigrant population, constitute the majority of California's working population. Approximately one out of every six workers in California was born in Mexico, a figure that increases to over one out of every four when combining U.S.-born Mexican Americans and Mexican immigrants. These figures contrast with those of the country as a whole, where Mexicans and Mexican Americans account for 4.7% and under 4%, respectively, of the total U.S. labor force (Figure 4).

The immigrant labor force has played a strategic role in the dynamism of the U.S. labor market. It is estimated that between March 1994 and March 2005, the working population in this country increased by 16%. Nearly half this increase (46.5%) was due to the incorporation of the immigrant labor force, and one out of every six new jobs (16.5%) was held by Mexican immigrants. The structural dependence of the California labor market on immigrant labor is even more acute. During the same 11-year period, the working population in California grew by 19%; Mexican immigrants contributed to this growth by accounting for one out of every three new workers (35.2%) while the immigrant population as a whole accounted for seven out of every 10 (69.1%) (Figure 5).[1]

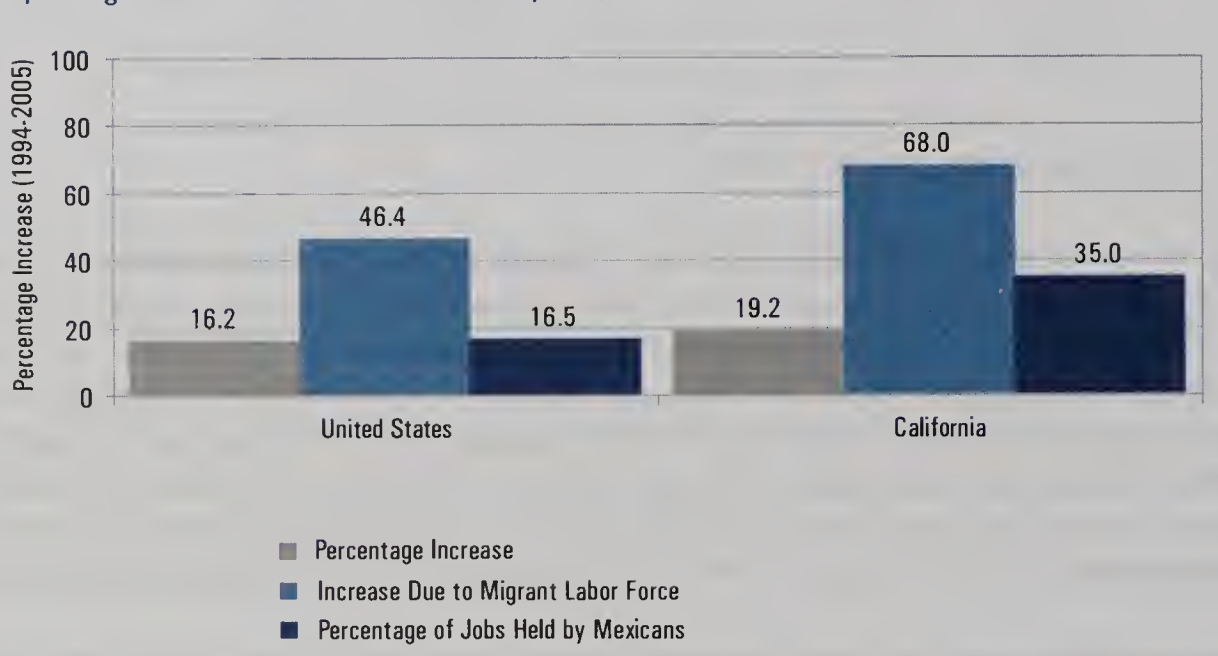
[1] Estimates based on March 1994 and March 2005 Current Population Survey.

Figure 4.4 Distribution of Employed Population Aged 18 or OverUnited States California, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

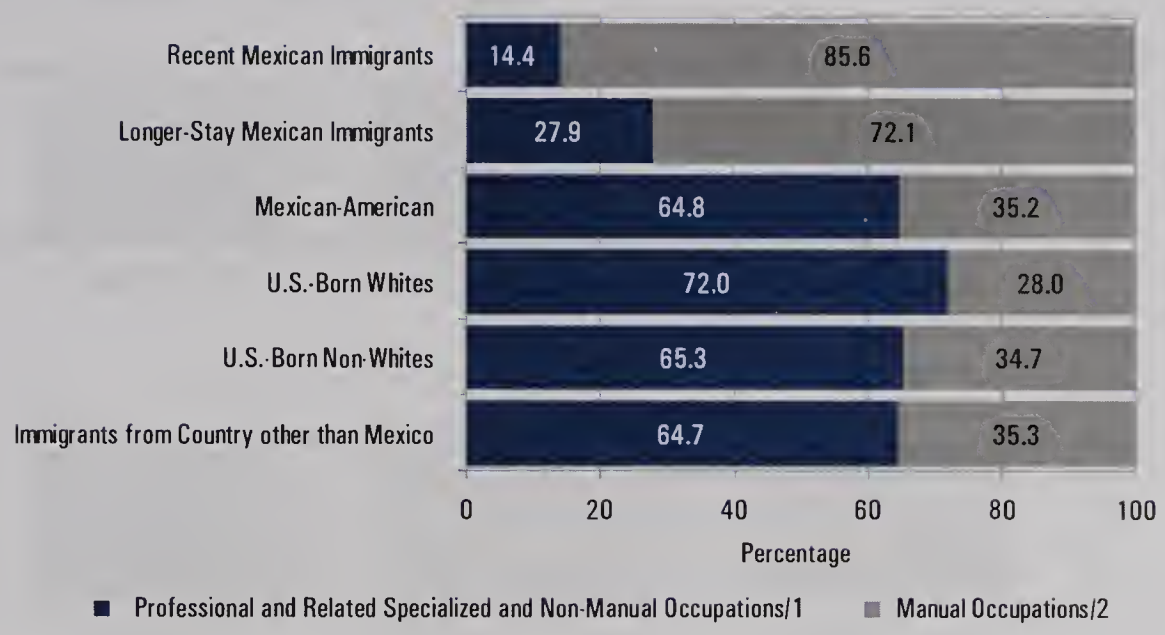
Figure 4.5 Percentage Increases of Population Ages 18 or Over in Labor Force and Contribution of Immigrant Labor. United States and California, 1994-2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

The employment structure of the U.S. economy is characterized by the predominance of professional and nonmanual occupations (68%), with only one out of every three workers being employed in manual labor (32.3%). This distribution is virtually the same in California and among all immigrant and native groups—except for Mexican immigrants . In their case, over seven out of every 10 are employed in manual jobs (Figure 6). Among more recent immigrants, this percentage rises to 83% in California and to 86% in the country as a whole. These results suggest that accumulating several years of residence in the country increases the likelihood that Mexican immigrants will move to better jobs while the posts they vacate will be filled by the new immigrants, creating a continual demand for immigrant labor that continually renews the pool of recent immigrants.

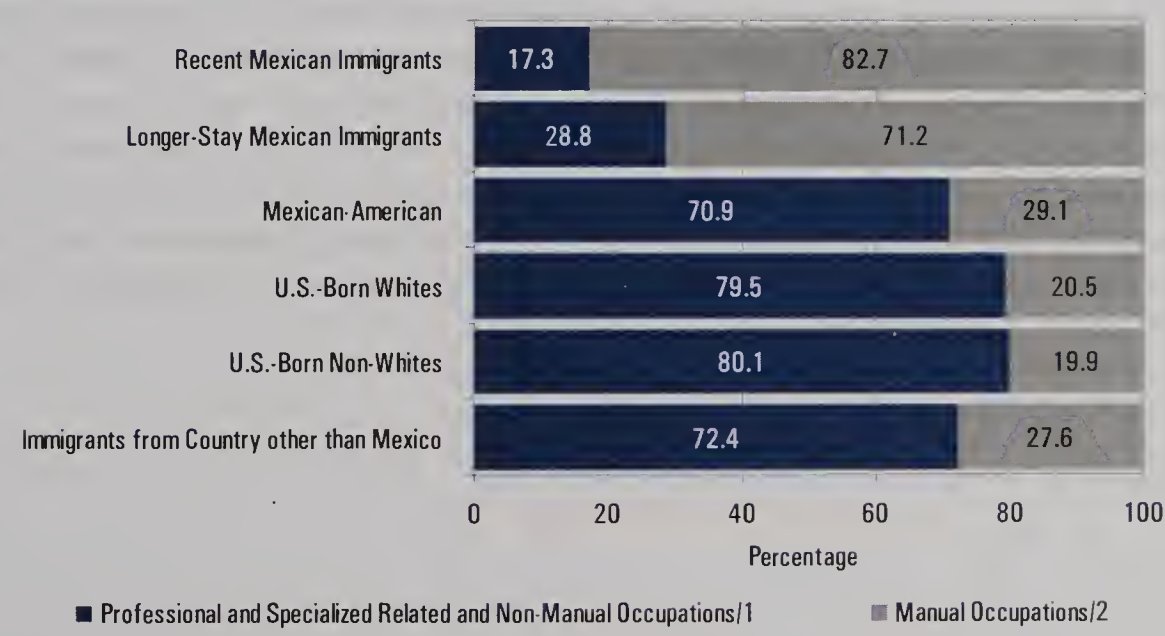
Figure 4.6 Distribution of Population Aged 18 or Over By Type of Job. California, 2005



Notes: 1/ Includes: Professional and related occupations, services, sales and administrative occupations.
2/ Includes: Cleaning and maintenance of buildings, food preparation, construction, repairs and production, farming, fishing and forestry.
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

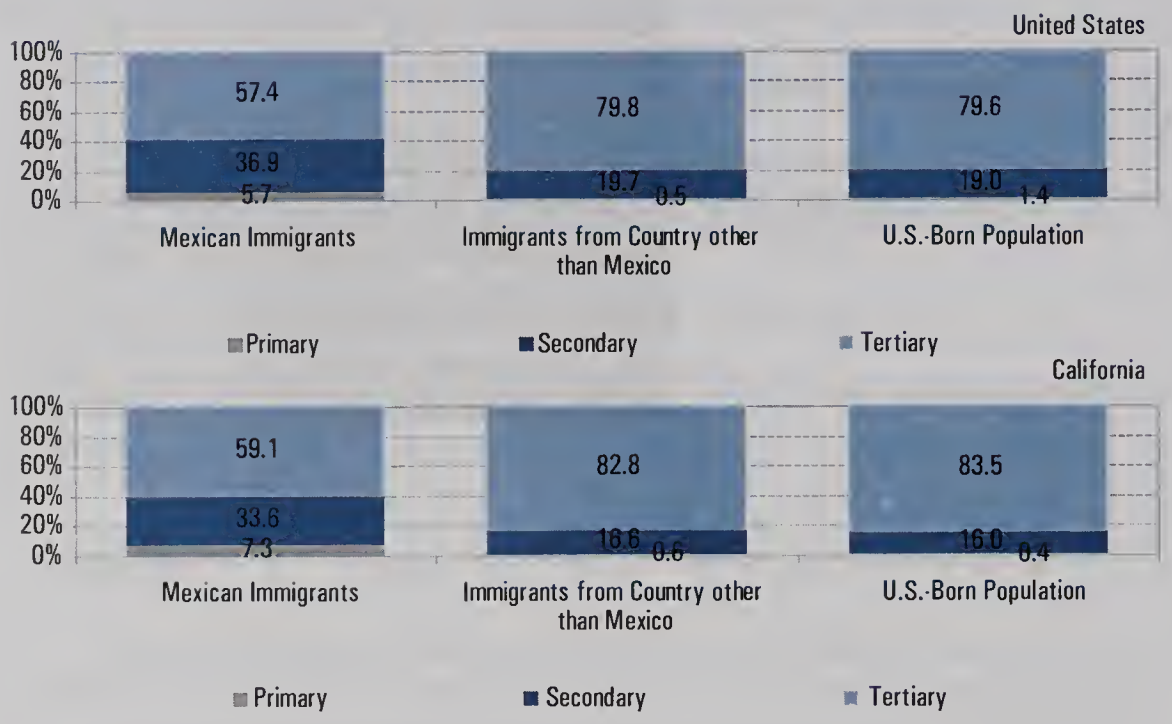
The traditional pattern of agricultural labor migration that characterized Mexican immigration during most of the last century has been radically transformed as a result of the economic restructuring the U.S. has undergone. Today 37% of the Mexican immigrant labor force is employed in the industrial sector, and only 6% in the agricultural sector (Figure 7). In both sectors, however, Mexican immigrant participation is extremely important, since one out of every 11 workers in the industrial sector and one out of every six farmworkers was born in Mexico. In California, this dependence is even more pronounced: over one out of every four workers in the industrial sector and three out of every four in the agricultural sector are Mexican immigrants (Figure 8).

Figure 4.7 Distribution of Population Aged 18 or Over by Type of Job.United States, 2005



Notes: 1/ Includes professional and related occupations, services, sales and administrative occupations.
2/ Includes cleaning and maintenance of buildings, food preparation, construction, repairs and production, farming, fishing and forestry.
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Figure 4.8 Distribution of Population Aged 18 or Over by Sector of Activity United States and California, 2005

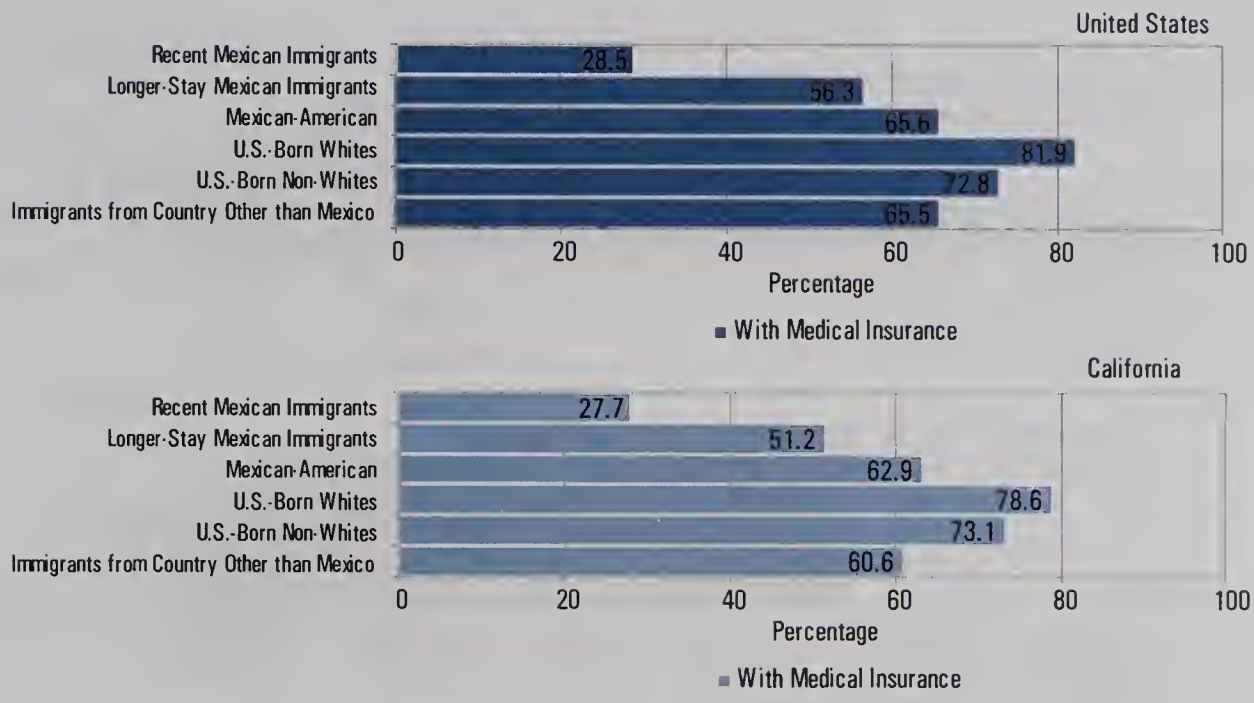


Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

The distribution of Mexican immigrant participation in the labor market is a key determinant of their access to health insurance systems, since the U.S. health system is based primarily on private health insurance that is offered through employee benefit packages. Low-wage jobs are the least likely to offer health insurance. The enormous concentration of Mexican workers in these jobs partly explains the lower medical coverage among this group.

Another way to look at how employment affects these immigrants' access to health care in the U.S. is to divide the workforce into manual (such as construction, manufacturing, janitorial, and farming), nonmanual (such as sales and administrative positions), and professional (such as scientists, educators, and nurses). The difference in medical coverage between manual workers and professional and nonmanual workers is 17 percentage points at the national level (71% and 88%, respectively) and 20 percentage points in California (63% and 85%). However, Mexican immigrants in the same type of jobs have considerably less access to health insurance coverage. The coverage gap between recently arrived Mexicans and the U.S.-born white population is nearly 45 percentage points for nonmanual jobs and over 50 for manual occupations. The inequality between these groups is lower in California (Figure 9).

Figure 4.9 Percentage of Persons Aged 18 or Over Engaged in Manual Occupations[1] with Medical Insurance. United States and California, 2005

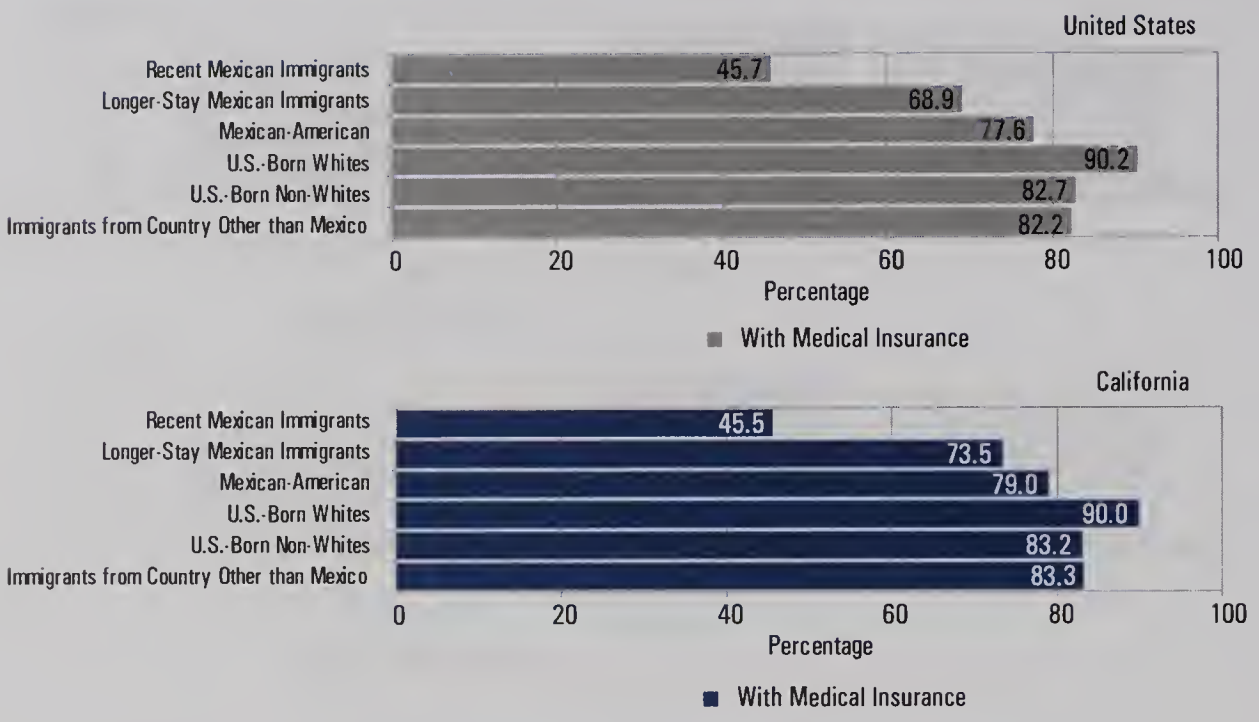


Notes: 1/ Includes: Cleanring and maintenance of buildings, food preparation, construction, repairs, and production, farming, fishing and forestry, etc.
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Even within the same occupational category, Mexican immigrants have lower health insurance rates. The disparities in access to health insurance are reproduced in the job categories in which over 70% of Mexican immigrants work, indicating that occupational type alone fails to explain Mexican immigrants' high degree of exclusion from this service. The risk of deportation, due to the fact that many are undocumented, combined with language and educational limitations, limit Mexican immigrants to the most exploited segments of the workforce.

Among other factors that might exacerbate these disadvantages is the expectation of a temporary sojourn and the difficulties associated with negotiating cultural differences, mastering a foreign language, and understanding how health systems operate. The low level of coverage among Mexican Americans also suggests the influence of cultural factors, associated with scarce investment in health insurance by the Mexican population (Figure 10).

Figura 4.10 Percentage of Persons Aged 18 or Over Engaged in Professional and Non- Manual Jobs[1] with Medical Insurance. United States and California, 2005



Notes: 1/ Includes: Professional and related occupations, services, sales, and administrative occupations.
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Poverty

Despite the low levels of educational attainment of Mexican immigrants and their high concentration in jobs placing them on the lowest rungs of the employment ladder, most of them achieve income levels that place them above the poverty line. Over seven out of every 10 recent immigrants to the U.S. and eight out of every 10 long-stay immigrants have family incomes above the official federal poverty line (Figure 11). These figures contrast markedly with the poverty levels in Mexico, where (as recently as 2004) approximately half the population lives in poverty (50.1%) and nearly a quarter (22.4% of the total population) in extreme poverty.[2]

The fact remains, however, that in comparison with the rest of the U.S. population, Mexican immigrants are more likely to live in poverty. This is particularly true among recent immigrants age 18 or over, whose poverty rate (28.4%) is 3.5 times that for U.S.-born whites (8.1%) and over twice that for other immigrants (12.1%).[3] The poverty rate of Mexicans residing in the U.S. for over 10 years is also among the highest: nearly one in every five faces this hardship. The poverty rate of Mexican Americans is only modestly better (14.8%) (Figure 12).

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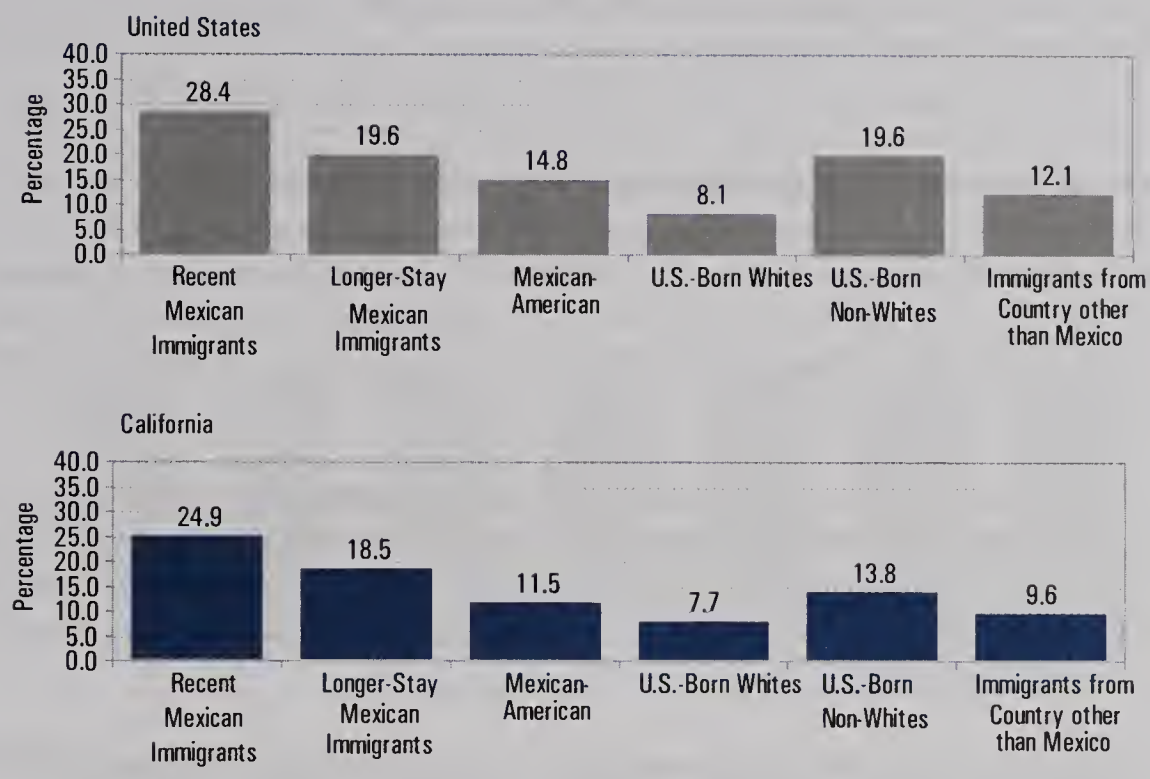
[2] Based on the National Household Income and Expenditure Survey 2004 and the Technical Committees Criteria for the Measurement of Poverty. Note: The U.S. and Mexican government use somewhat different methodologies to determine the poverty line. The Mexican "pobreza de patrimonio" is the closest to the U.S. definition of poverty. The Mexican "pobreza alimentaria" is similar to a measure of extreme poverty at 50% of the poverty line.

[3] This rate similar to that for U.S.-born non-whites (19.6%).

Figure 4.11 Population Aged 18 or Over Living in Conditions of Poverty. United States and California, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

These results suggest that immigrant status does not by itself increase the likelihood of living in poverty, but in combination with being a Mexican immigrant with little to no education, it does. The relatively low level of poverty reported among immigrants from other countries is associated with highly selective migratory processes, the result of the growing U.S. demand for highly skilled immigrant labor. Many of these immigrants become integrated into American society in even more advantageous conditions than certain groups of U.S.-born citizens, such as Mexican Americans, but particularly U.S.-born non-whites. Various practices of racial segregation appear to contribute to the determination of poverty in the U.S.

In California, the poverty level for each of the groups analyzed is less than the national average. On the other hand, the cost of living in California is higher than the national average, which is not accounted for in the poverty calculations. The groups with the highest risk of living in poverty in the state include both Mexicans who have recently entered the country (24.9%) and those with over 10 years of residence (18.5%). With the exception of U.S.-born whites, who live in poverty in nearly equal percentiles in California and nationwide (the differential is less than 1 percentage point), the differences in the rest of the groups are more pronounced. It is worth noting the 3.5 percentage point difference in poverty levels between Mexicans who have recently entered the country and their counterparts nationwide and the nearly 6 percentage point difference in relation to U.S.-born nonwhites. This indicates that recent immigrants to California receive better wages, perhaps a result of California's minimum wage being higher than the federal minimum, or that more members of immigrant families are employed, or both.

Although each of the groups considered in this analysis is slightly better off in California than in the country as a whole, California's general level of poverty is actually slightly higher than the national average (11.2%). This higher figure can be associated with the higher immigrant population, especially of Mexican origin, in the state.

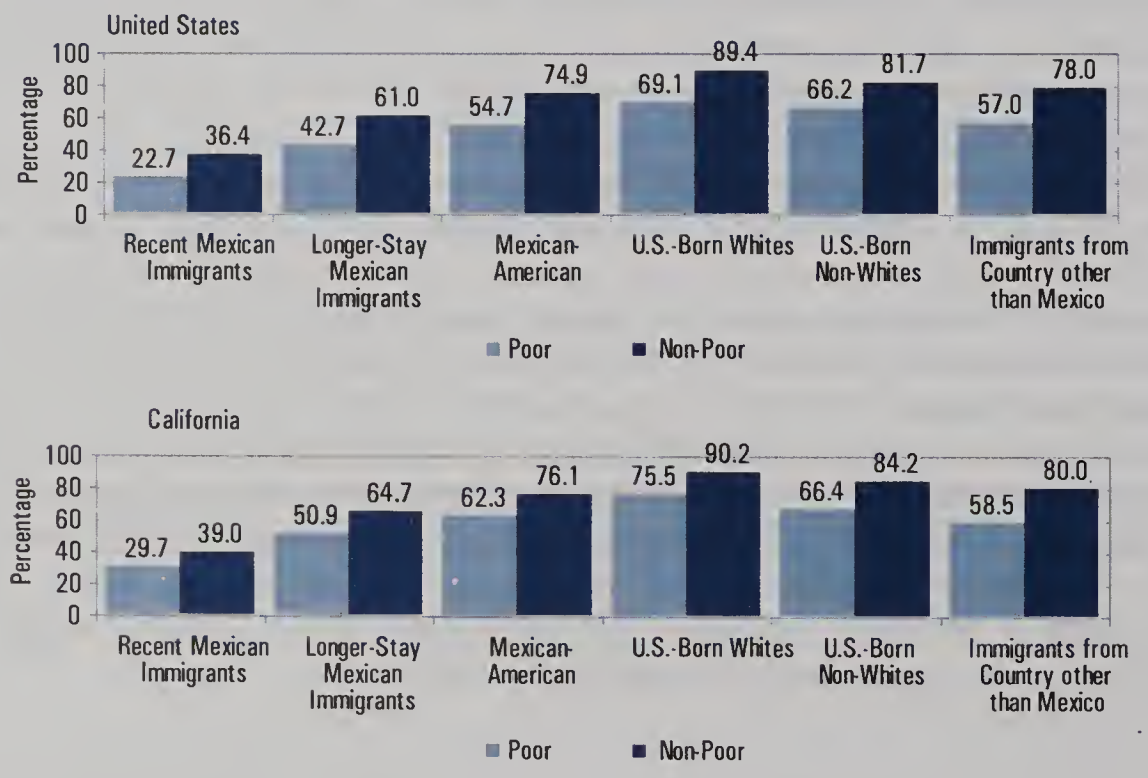
The Combination of Immigration and Poverty Increases Vulnerability

Being poor significantly reduces access to resources for human development, including medical insurance. In the U.S., only 62.7% of those below the poverty line have any type of medical insurance, public or private. (That figure is nearly 20 percentage points lower than that for those living above the poverty line—85.2%.)

The risk of being excluded from health insurance coverage because one is poor is increased if one is also an immigrant, particularly an immigrant from Mexico. This is due, among other things, to the combined effect of being engaged in low-paid jobs, which are less likely to offer health benefits, and the restrictions on access to public services, imposed on both legal and undocumented migrants in recent decades.

Recent Mexican immigrants have far lower levels of coverage, whether poor (22.7%) or not (36.4%), compared to poor Mexican immigrants with 10 or more years of residence in the country (42.7%), Mexican Americans (54.7%), and non-Mexican immigrants living in poverty (57%). Among the remaining groups, coverage ranges between 61% and 89%, rates that correspond roughly to those of long-term nonpoor Mexican-born residents and nonpoor U.S.-born whites (Figure 12).

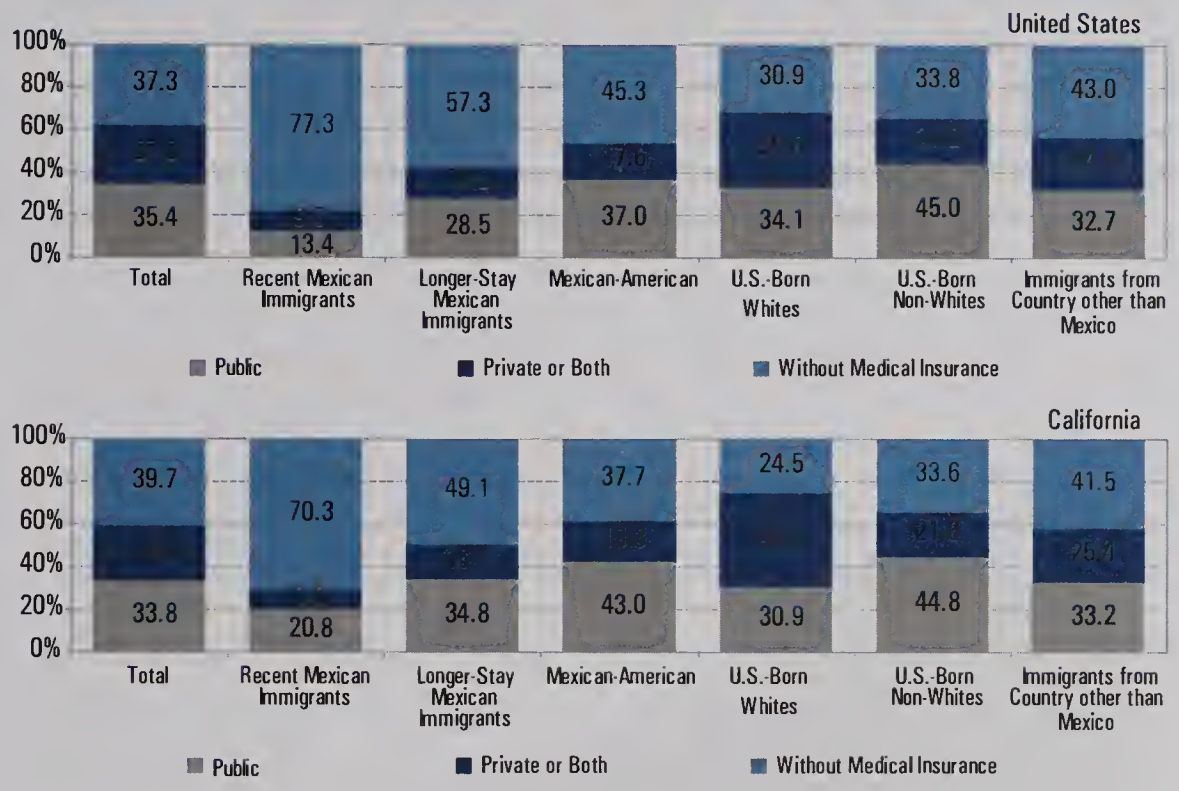
Figure 4.12 Population Aged 18 or Over With Medical Insurance Resident in the United States and Poverty Status 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

California has assigned resources and promoted strategies to mitigate federal restrictions on medical coverage imposed on immigrants. Its efforts have paid off: coverage levels of each of the groups analyzed in this study are higher in California than the national average. And while the focus has been placed mainly on the care of children and pregnant women, the population over 18 years of age has benefited indirectly (Figure 13).

Figure 4.13 Población de 18 años de edad o más en condición de pobreza por tipo de seguridad médica.Estados Unidos y California, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

As a result of California's efforts at mitigation, coverage levels of each of the groups analyzed in this study are higher in California than the national average, and in particular the poor appear to have benefited. Coverage is more than seven percentage points higher among California's immigrants living in poverty (whether recent immigrants or those in the U.S. for longer than 10 years) relative to their counterparts nationwide, and coverage in California is higher as well for Mexican Americans, followed by poor white Americans (for whom coverage is 6 points higher than that of their counterparts nationwide).

Despite these figures showing higher coverage in California across the board, they are somewhat misleading, since the extent of state medical insurance coverage average (79%) is below the national average. This apparent discrepancy is due to the greater presence of Mexican immigrants in the state, most of whom do not receive employment benefits (including medical coverage) in the types of work that they perform.

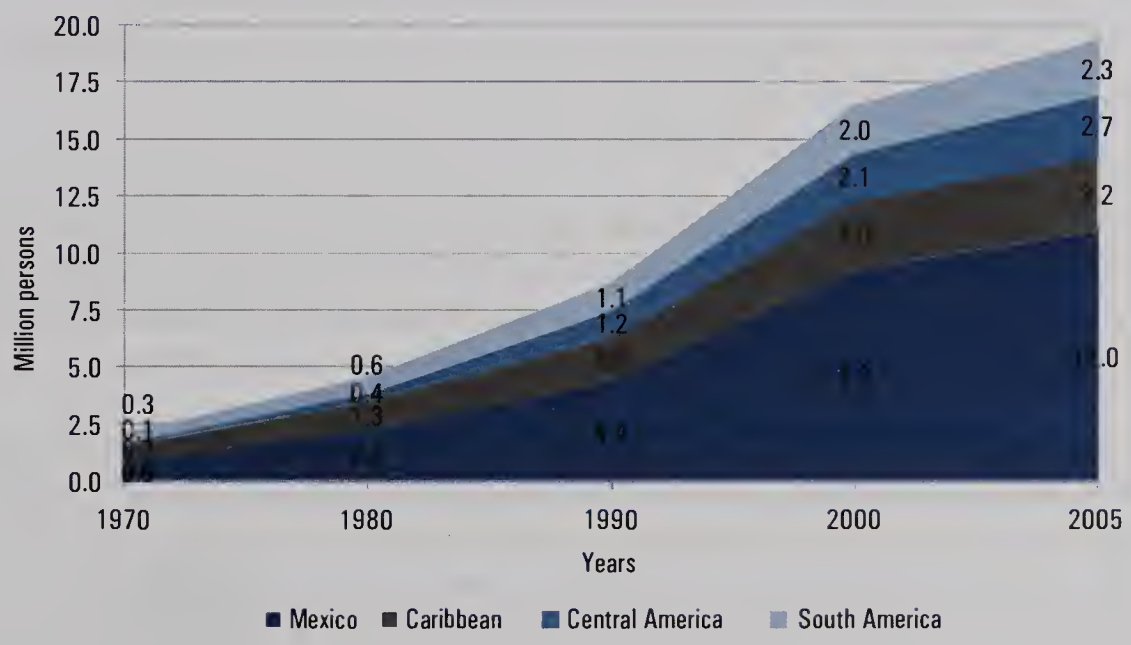
Given the low levels of health insurance coverage of poor Mexican immigrants, their presence among the population covered by public medical insurance services is almost imperceptible. Despite the fact that poor Mexican immigrants account for almost 10% of people living in poverty in the U.S., they comprise only 0.9% of the U.S. population covered by public medical insurance.

A similar situation can be found in California, where poor Mexicans account for 24% of the state's total population living in poverty yet constitute only 4% of those who receive public health insurance. These results suggest that the fiscal cost of caring for the poor Mexican population within the public health system is relatively low.

Central American Immigrants in the United States

The Latin American and Caribbean population resident in the United States has seen an extraordinary increase since the early 1970s. Between 1970 and 2000, the number of immigrants from this region increased eightfold, from 2 million to 16.4 million, and is estimated to have risen to over 19 million in 2005 (Figure 1). There are more immigrants in the U.S. from Latin America than from any other region in the world. Latin American immigrants account for over half the foreign-born population in the U.S. and 2.8% of the total resident population.

Figure 5.1. Latin American and Caribbean Population Resident in the United States, 1970, 1980, 1990, 2000 and 2005

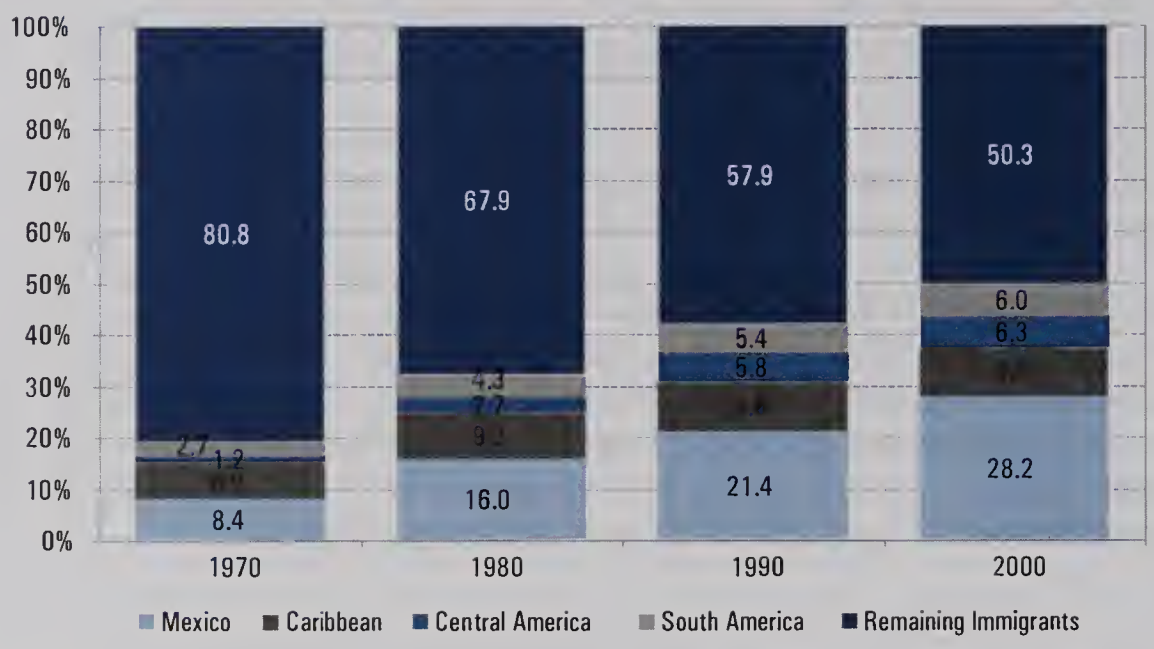


Source: Estimates based on U. S. Census Bureau. 15-percent sample 1970, 5-percent sample 1980, 1990 and 2000, Current Population Survey, March 2005.

Among this Latin American population, the largest number of immigrants came from countries closest to the United States. During the 1980s and 1990s, Mexico was by far the largest sender of migrants to the United States, followed by countries in the Caribbean, Central America, and South America (Figure 2).

Today most Central American countries are net population losers. The principal destination of emigration has been the United States. Before 1980, migratory flows between the region and the United States mainly involved migrants from Mexico. During the 1980s and 1990s, however, civil wars, extreme violence, and natural disasters led to the emergence of various waves of Central American migrants heading for the United States, as well as other destinations.

Figure 5.2. U.S. Immigrant Population by Region of Birth, 1970, 1980, 1990 and 2000



Source: Estimates based on U.S. Census Bureau. 15-percent sample 1970, 5-percent sample 1980,1990 and 2000.

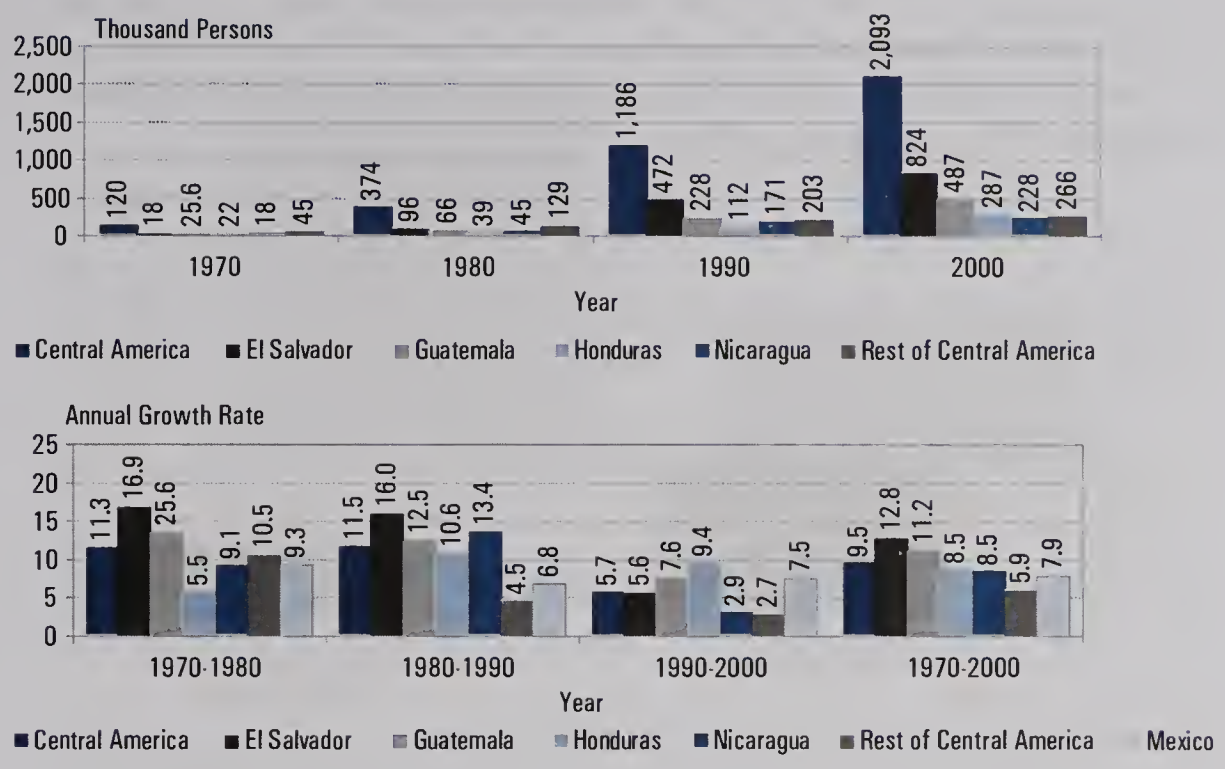
There was also a strong economic motivation for accelerated international migration of Central Americans during the last decades of the 20th century. This new migratory stage is closely linked to the growing economic integration of Central America with the United States in a context where the Central Americans economies have been in an enormously disadvantaged position.

Central American countries, like other Latin American and Caribbean countries, have suffered recurrent economic crises, deepening poverty. The economic export model that Central American nations adopted has failed to boost employment sufficiently to absorb their growing labor supply, which in turn has increased migratory pressures. At the same time, globalization has facilitated and reduced the cost of communications and transport, increasing access to information on opportunities that originate beyond national borders. This process has been facilitated by the consolidation of broad, solid social networks with immigrants in the U.S. that encourage and facilitate migratory flows.

Simultaneously, the United States has experienced a growing need for migrant workers as a source of cheap labor to fill unskilled, poorly paid jobs.

Despite the fact that fewer Central American immigrants entered the U.S. than Mexican or Caribbean immigrants between 1970 and 2000, Central American immigrants had the largest relative increase during that time (16-fold, from 120,000 to just over 2 million). The number of Central American immigrants increased most rapidly during the 1970s and 1980s, at annual rates of 11.3% and 11.5%, respectively. This was a much higher growth rate than that observed, for example, among the Mexican population in those decades (9.3% and 6.8%) (Figure 3).

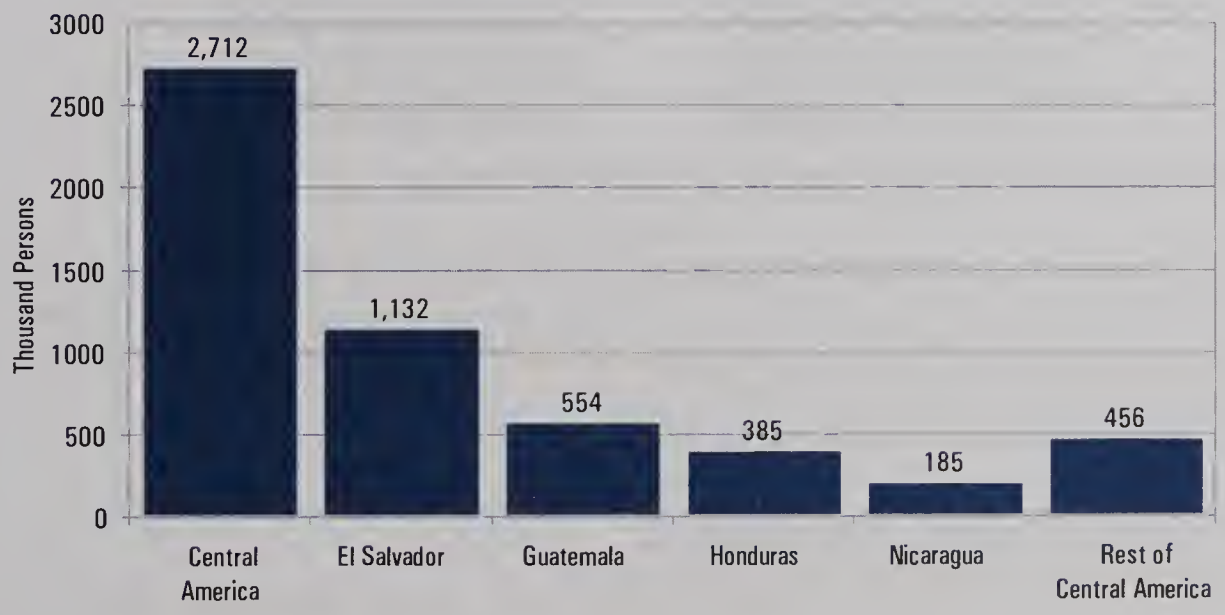
Figure 5.3. Population Born in Central America Resident in the United States and Growth Rate, 1970-2000



Source: Estimates based on U.S. Census Bureau. 15-percent sample 1970, 5-percent sample 1980,1990 and 2000.

In 2005, 2.7 million Central American immigrants lived in the U.S., accounting for 0.9% of the country's population and 7.3% of the foreign population. The largest contingents of Central Americans are from El Salvador, Guatemala, Honduras, and Nicaragua (Figure 4).

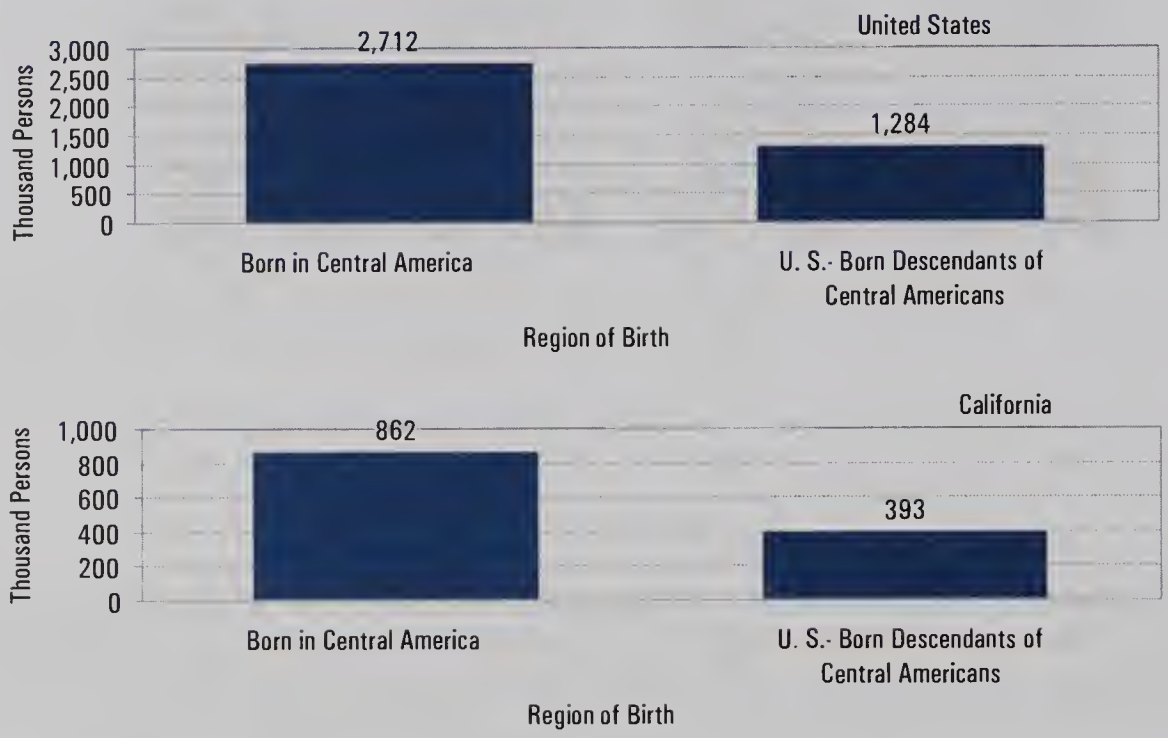
Figure 5.4. Population Born in Central American Countries Resident in the United States 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

As a result of the high immigration rates in recent decades, by early 2005 the number of U.S.-born descendants of Central American immigrants totaled 1.3 million. The combined number of Central American immigrants and their U.S.-born descendants totals almost 4 million residents, 1.4% of the U.S. population. California has been the main recipient of Central American immigrants. One out of every three immigrants from this region lives in California, and approximately 30% of the U.S. population of Central American descent (Figure 5).

Figure 5.5. Population of Central American Origin (immigrants and U.S.-born) resident in United States and California, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

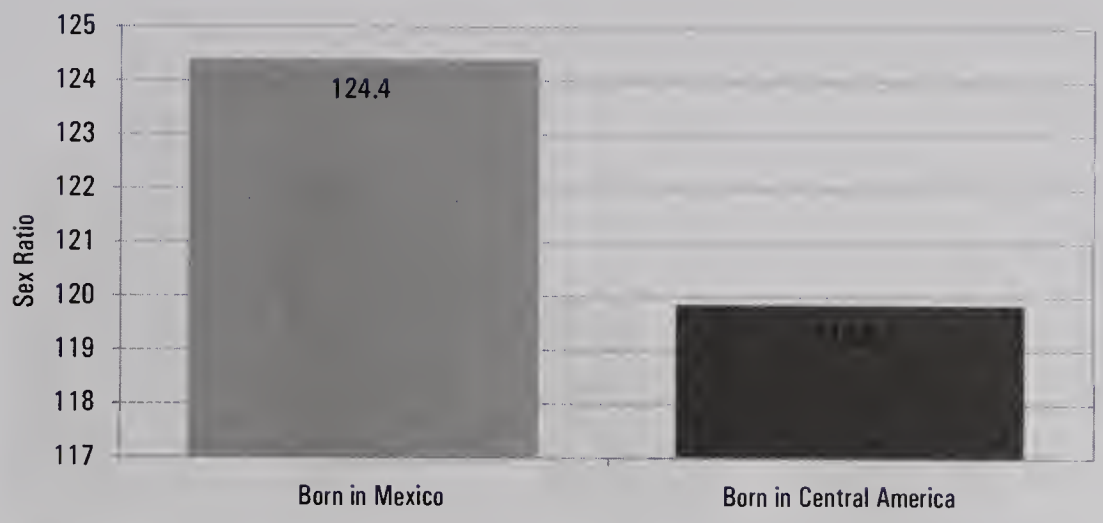
Most Central Americans Emigrate to Find Work

Most immigrants from Central America are male (120 men to 100 women), and the vast majority (85%) are of working age. A large majority of this age group (66%) are young men. Both of these features also characterize Mexican immigration, demonstrating the employment-oriented nature of both migratory flows (Figures 6 and 7).

Most Central American Immigrants Have Lived in the U.S. for Over 10 Years

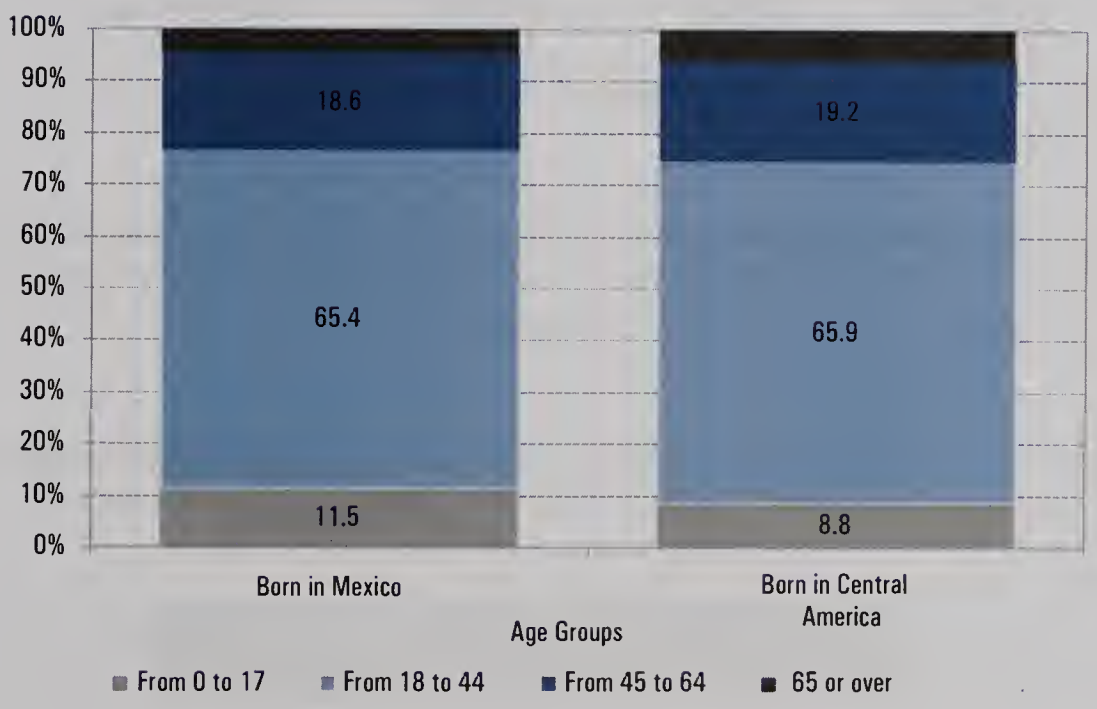
The longer an immigrant remains in a new country, the more socially integrated he or she becomes. Longer residence makes it more likely that immigrants will learn the new language, understand how the new society and its institutions work, obtain better working conditions, and consolidate family and neighborly relations that make it easier for immigrants to take advantage of a wider range of opportunities.

Figure 5.6. Sex Ratio (number men per 100 women), Mexican and Central American Immigrant Populations in the United States, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

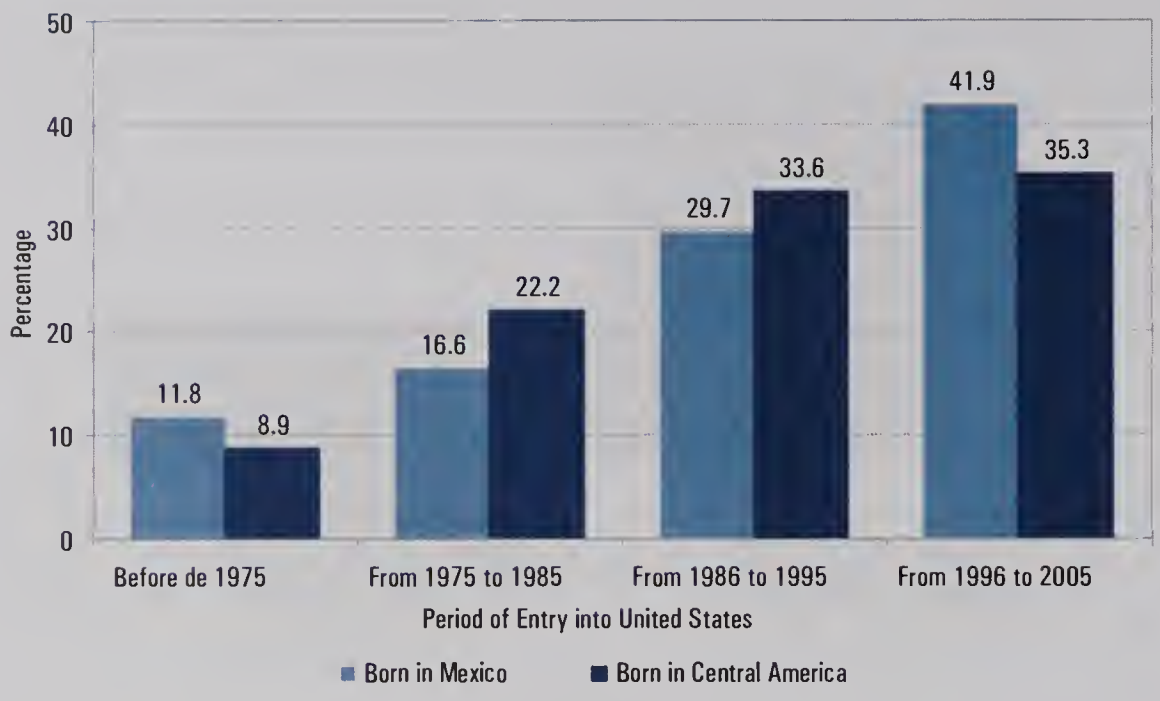
Figure 5.7. Age Distribution of Mexican and Central American Immigrant Populations in the United States, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

The Central American population with fewer than 10 years' residence in the U.S. accounts for just over a third of the total, while over half arrived in the country between 1975 and 1995. Compared with Mexican immigrants, four of every 10 of whom have been in the country for less than 10 years, Central Americans as a whole have the advantage of being better established and more experienced (Figure 8).

Figure 5.8. Mexican and Central American Immigrant Populations by Year of Entry into United States, 2005

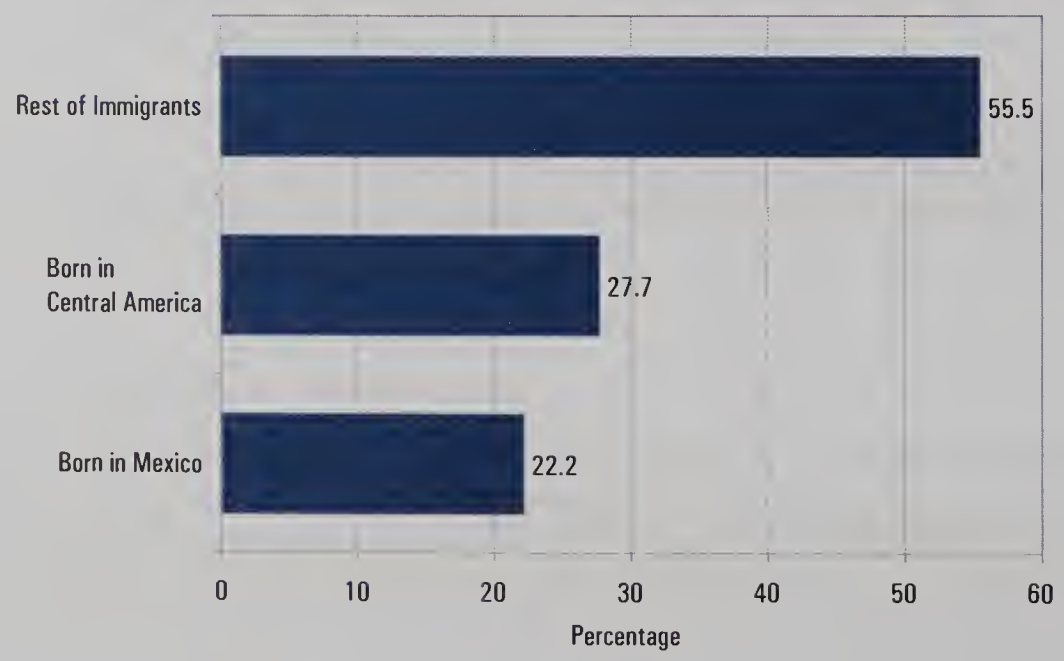


Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Over One out of Every Four Central Americans Has U.S. Citizenship

Naturalization encourages immigrants' social integration. Of Central Americans, just over one out of every four (28%) is a naturalized U.S. citizen, a figure that is slightly higher than that for Mexicans but far lower than that for other immigrants (55%) (Figure 9).

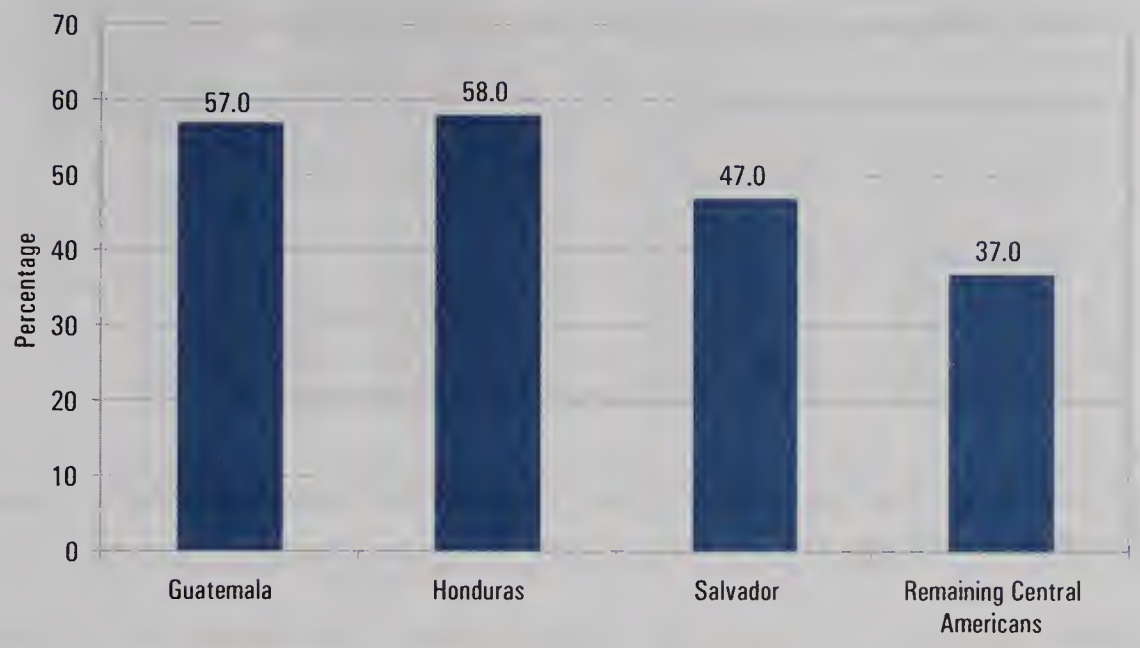
Figure 5.9. Percentage of Mexican, Central American, and Other Immigrant Populations Aged 18 or Over by U.S. Citizenship, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

One of the common features of Central American and Mexican migration is that unauthorized (undocumented) migration is becoming increasingly common. According to estimates by the Pew Hispanic Center,[1] nearly six out of every 10 Guatemalan (57%) and Honduran (58%) immigrants residing in the United States in 2000 were undocumented, as were nearly half of all Salvadorans (47%). This situation exposes immigrants to various forms of discrimination and exclusion, as well as placing them at greater risk of exploitation and abuse in the labor market (Figure 10).

Figure 5.10. Undocumented Immigrants in the United States as a Percentage Total Immigrants from Each Country, 2000



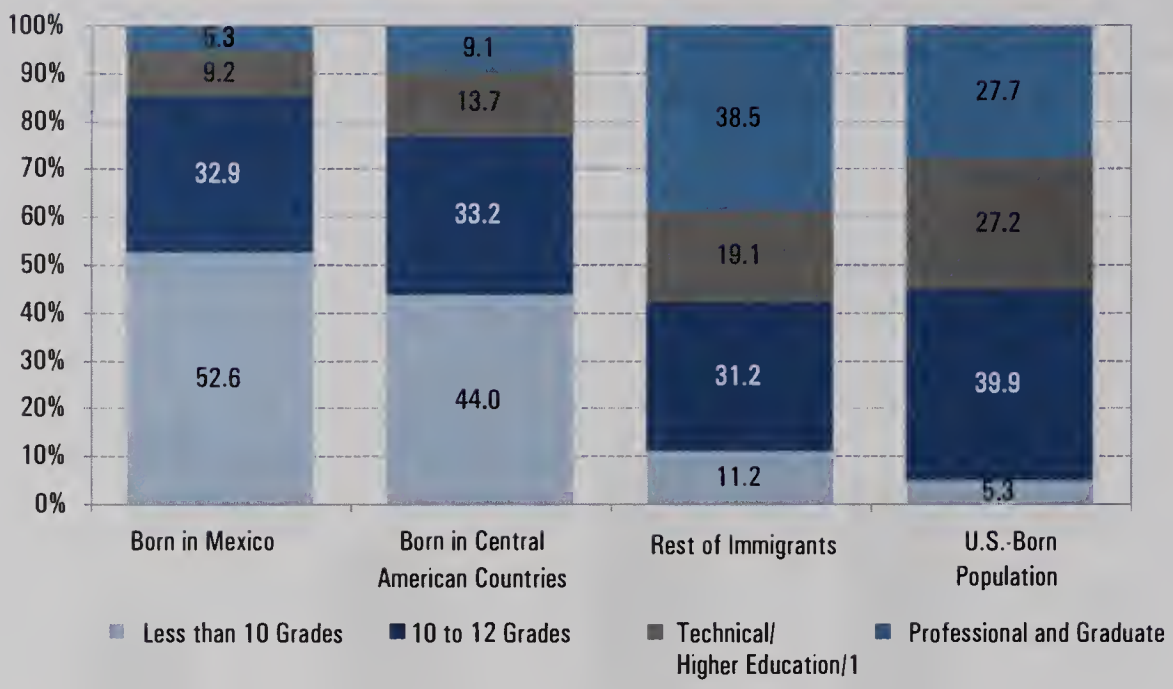
Source: Passel, Jeffrey. Latin American Migration to the United States: Trends and Impacts, lecture delivered at Experts' Meeting on Migration and Development in Latin America, Mexico City, November 10 to December 2, 2005.

Central American Immigrants' Educational Level: Higher Than Mexican Immigrants', Much Lower Than That for the U.S-Born

Another favorable characteristic of Central American immigrants relative to their Mexican peers is their relatively higher educational attainment: 44% have fewer than 10 years of schooling, a significantly smaller figure than that for Mexicans (52.6%). A higher proportion have undertaken technical or higher studies (23% and 14.5% respectively). Central Americans, however, are located at the lower end of the average U.S. educational achievement. Among the U.S.-born population, fewer than 5% have less than 10 years' schooling while 55% have undertaken technical or higher studies. The educational lag of Mexican and Central American immigrants leads them to take up unskilled work, which entails low wages and integration into American society in less favorable conditions (Figure 11).

[1] Jeffrey Passel. "Latin American Migration to the United States." Lecture delivered at the Experts' Meeting on Migration and Development in Latin America, Mexico City, November 10 to December 2, 2005.

Figure 5.11. Mexican, Central American and Other Immigrant Populations Ages 25 or Over by Educational Attainment, 2005



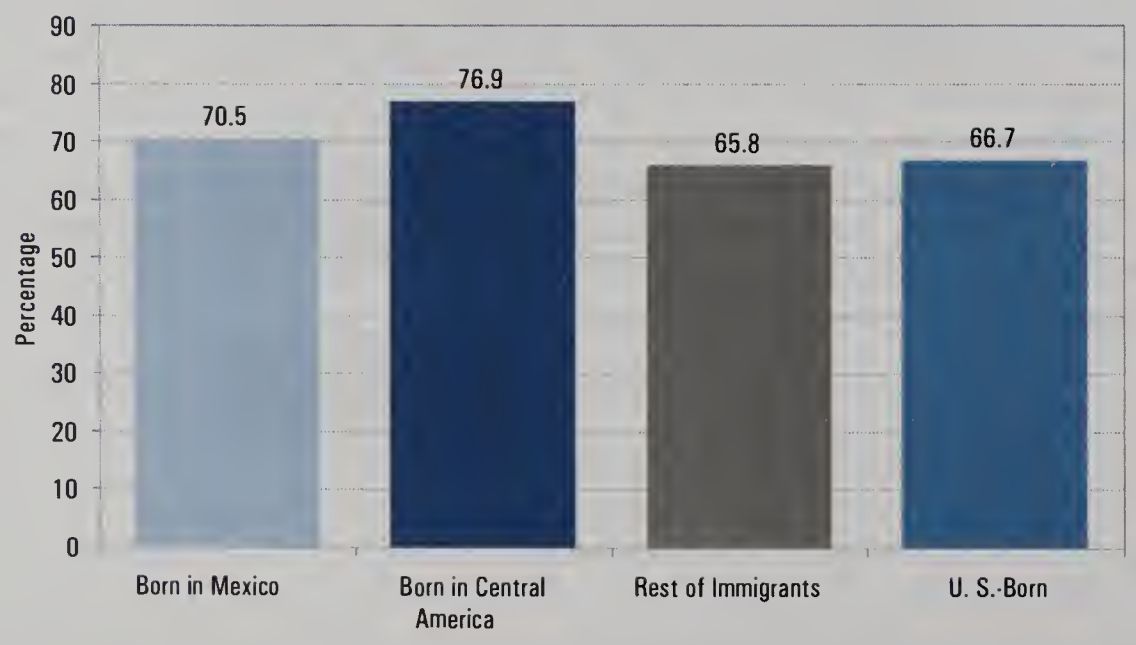
1/ Includes: technical degrees, and some undergraduate studies or completed degree.
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Central American Labor Migration Characterized by High Employment Rates and Manual Jobs

Central American emigration to the United States is shaped by the attraction of job opportunities in the U.S., together with the sharp contrasts in salaries and employment opportunities between the countries in the region.

Once in the United States, Central Americans report high levels of labor-force participation. Nearly eight out of every 10 in this population who are 18 or over are economically active (77%), far higher than the rates for other groups of immigrants and the U.S.-born population (Figure 12). There are 1.9 million Central American workers in the U.S., 93% of whom are employed, reflect-

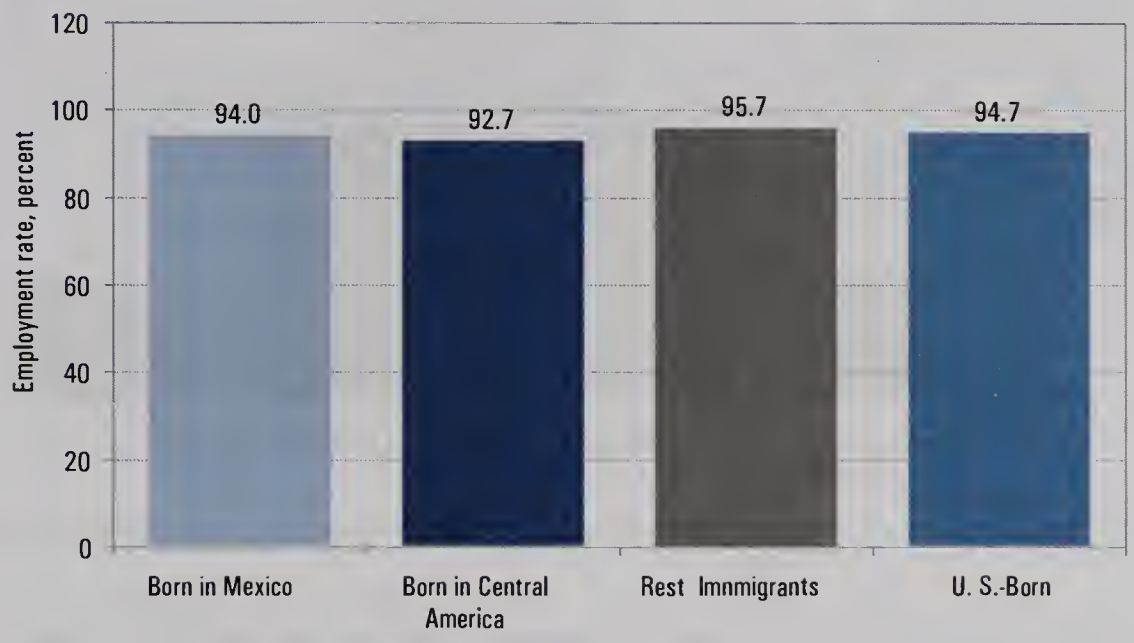
Figure 5.12. Percentage of Economically Active Population Ages 18 or Over by Population Group, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

ing the existence of a broad demand in the U.S. labor market for the type of labor offered by Central Americans (Figure 13). The Central American immigrant unemployment rate is 7%, very

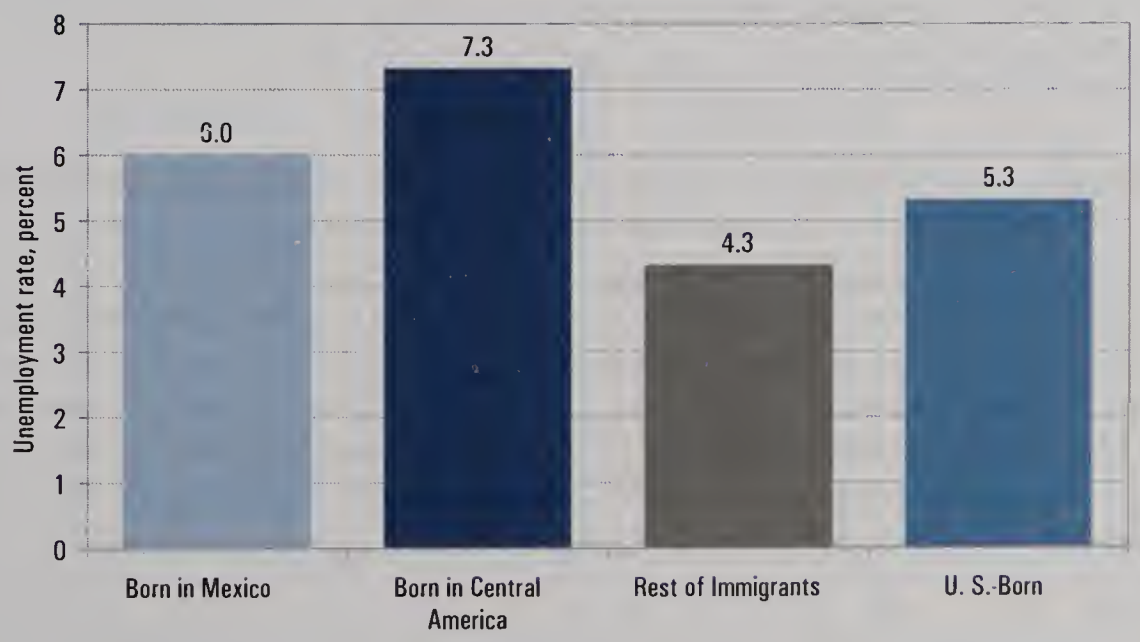
Figure 5.13. Employment Rate of Economically Active Mexican, Central American and Other Immigrants, and the U.S.-born Population Ages 18 and over, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

similar to that for Mexicans (6%) but much higher than that for other immigrants (4.3%) and the U.S.-born population (Figure 14).

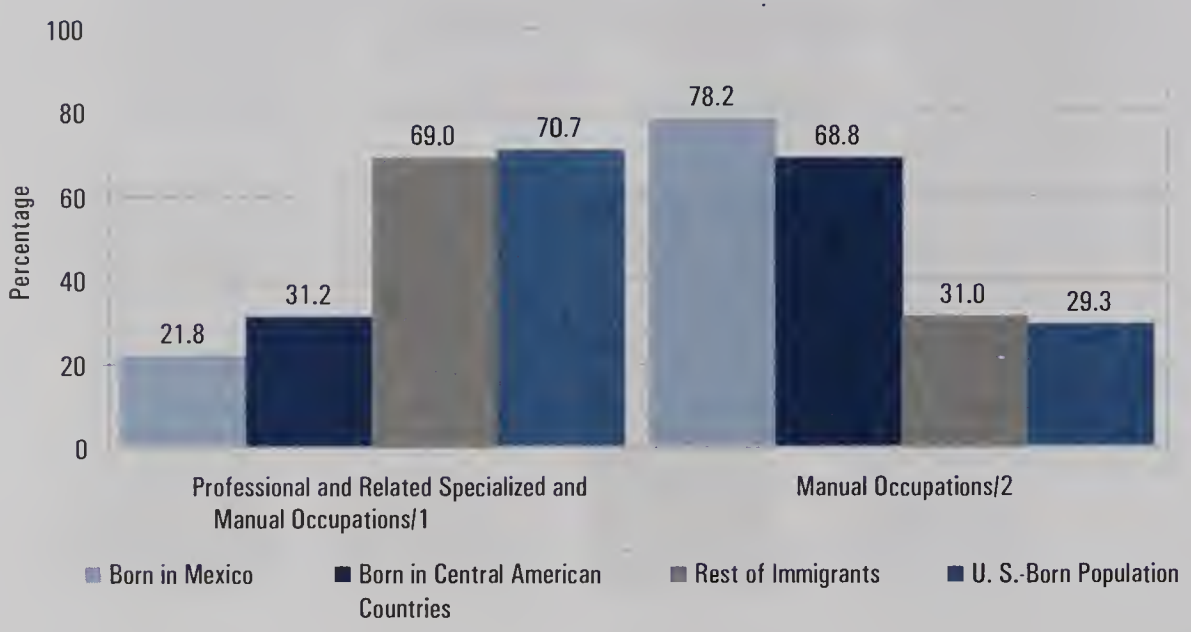
Figure 5.14. Unemployment Rate of Economically Active Mexican, Central American and Other Immigrants, and the U.S.-born Population Ages 18 or Over, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Nearly seven of every 10 Central Americans are concentrated in poorly paid manual occupations (Figure 15). The average income earned by employed Central American immigrants is about $25,000

Figure 5.15. Distribution of Mexican, Central American and Other Immigrants, and the U.S.-Born Population Ages 18 and Over by Occupation, 2005



Notes: 1/ Includes: Professional and related occupations, services, sales, and administrative occupations.
2/ Includes: Cleaning and maintenance of buildings, food preparation, construction, repairs, and production, farming, fishing and forestry etc.
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

per year, nearly $14,000 less than the average income of immigrants from other countries but slightly higher than that for Mexicans (Figure 16).

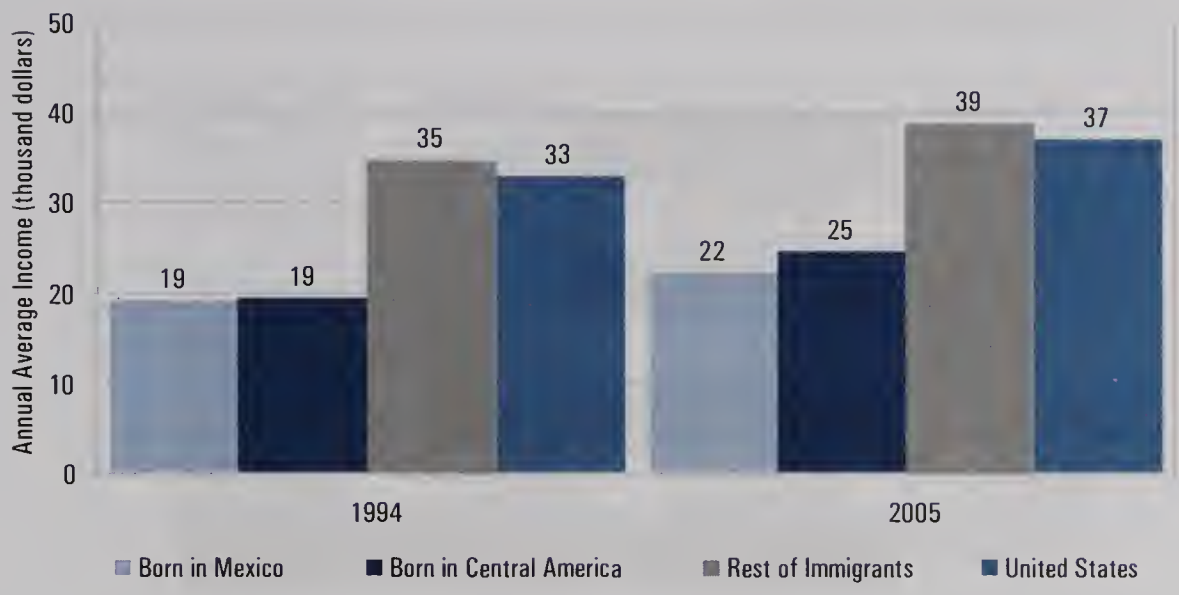
During the last decade, U.S. workers reported a significant increase in their income, even after accounting for inflation. Because they have lower incomes, however, Central Americans reported the highest proportional income increase (21%), followed by Mexicans (14%), all other immigrants (12%), and the U.S.-born population (13%) (Figure 17). The increase in the earnings of Central American and Mexican immigrant workers is another indicator of the high demand in the U.S. market for this type of labor.

Poverty Rates are Lower for Central American Than for Mexican Immigrants

Of the four populations under comparison, Central American and Mexican immigrants have the highest rates of people living in poverty.[2] However, there are sharp differences in this indicator between the two groups. Among Central Americans, over 17% live in poverty, a third lower than the rate for Mexican immigrants (almost 26%). The U.S.-born population and all other immigrants have similar poverty rates, respectively over 12.2% and almost 12.3% (Figure 18). The total of Central Americans living in poverty is approximately 467,000.

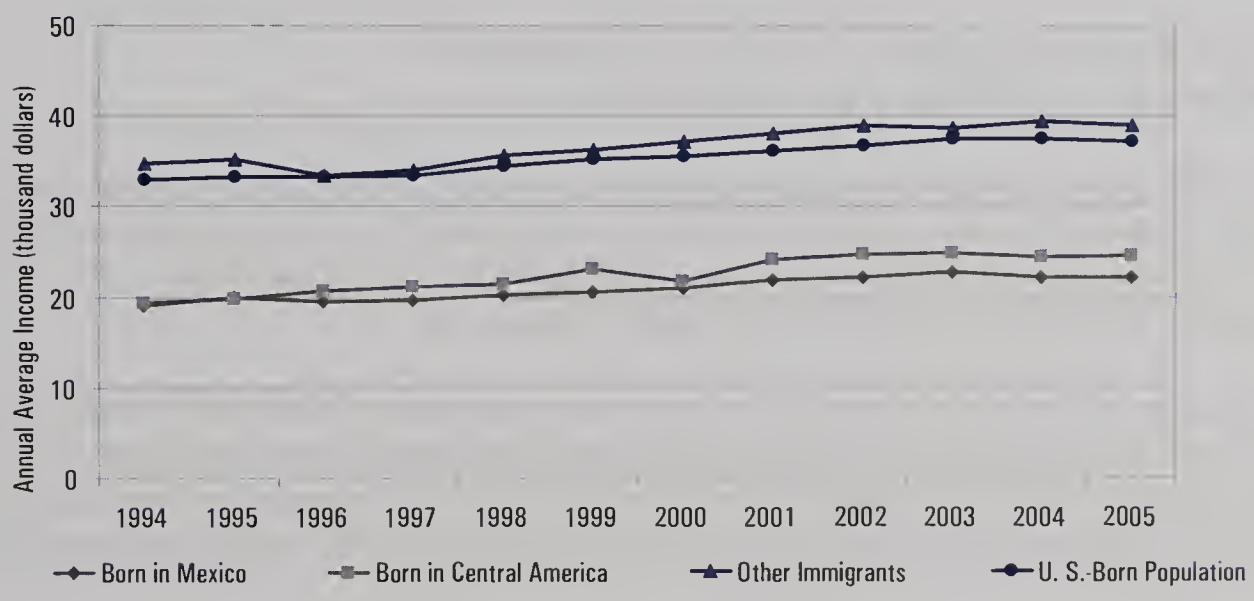
[2] According to the U.S. Census Bureau, the average poverty threshold for a family of four in 2004 was $19,484 in total annual income.

Figure 5.16. Average Annual Income of Immigrant (Mexican, Central American and Other) and U.S.-Born Population, 2005



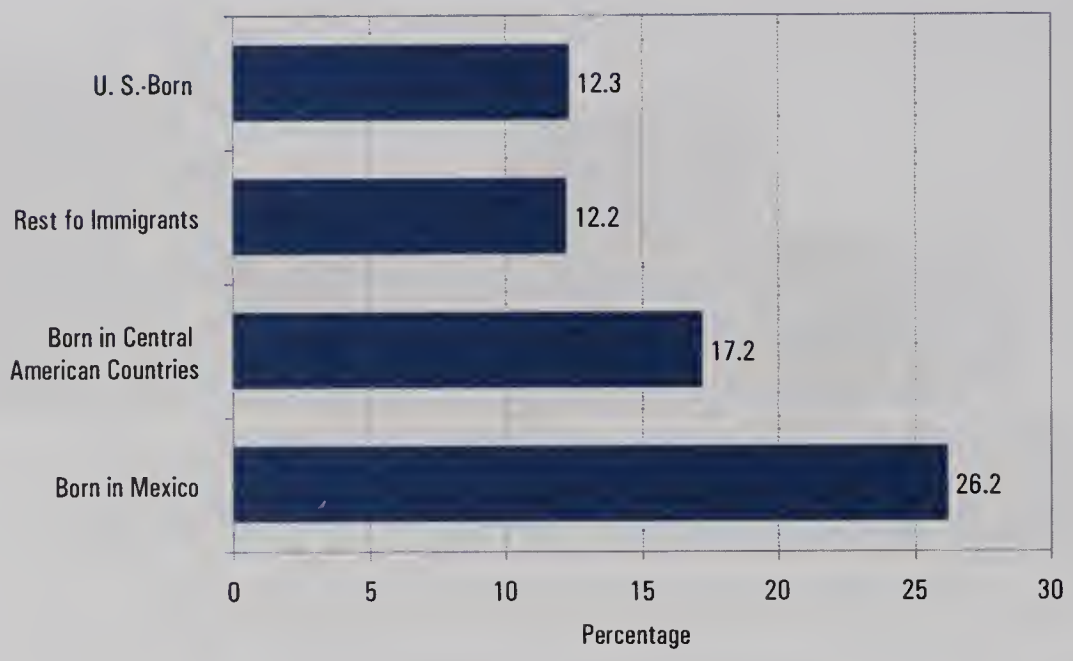
Note: Constant income based on U.S. National Consumer Price Index, Base 2005.
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Figure 5.17. Average Annual Income of Mexican, Central American and Other Immigrants, and the U.S.-Born Population, 1994-2005



Note: Constant income based on U.S. National Consumer Index, Base 2005.
Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Figure 5.18. Mexican, Central American and Other Immigrants with Incomes Below Poverty, United States, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Nearly One out of Every Two Central American Immigrants Lacks Medical Insurance

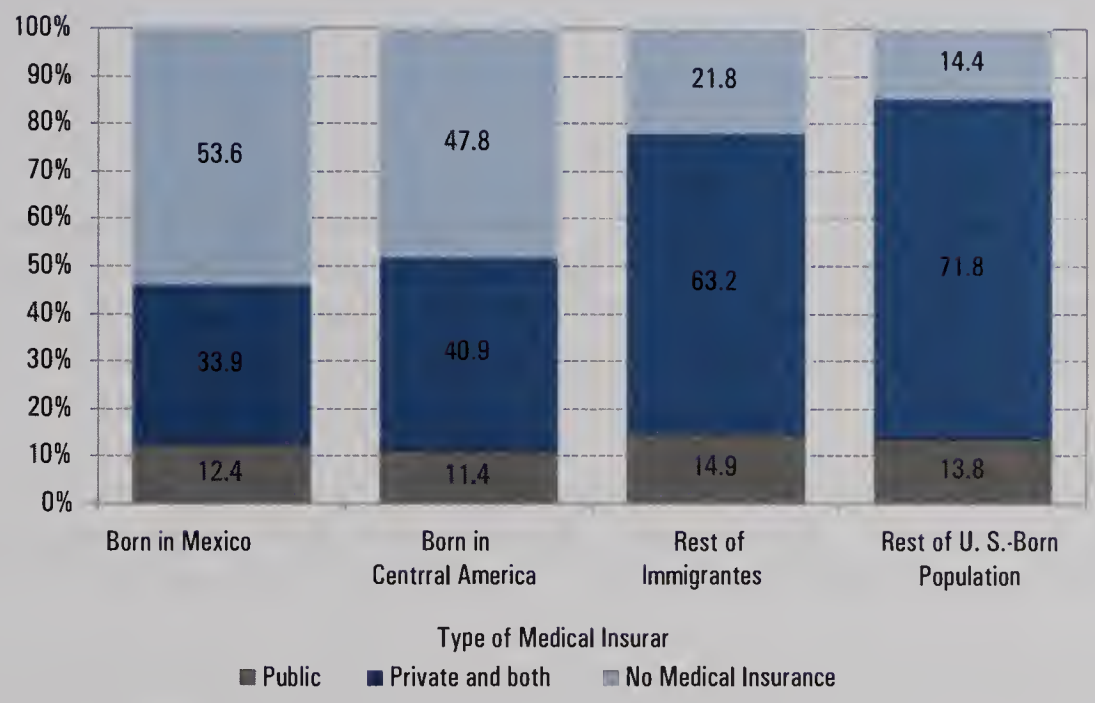
One of the greatest needs among Central American immigrants is access to health services. Only 52% have medical insurance (whether public or private), which is only slightly better than the 46% of Mexican immigrants with medical insurance (Figure 19). In contrast, 78% of other immigrants and 86% of the U.S.-born population has medical insurance.

The differences between the medical insurance coverage rates of Central American and Mexican immigrants are the result of differences in the rates of private insurance coverage: Four out of every 10 Central American immigrants have private insurance, as opposed to three out of every 10 Mexican immigrants. Approximately 12% of both groups have public medical insurance (Figure 19).

The higher educational attainment of Central Americans is a factor that may be helping them to obtain better paid jobs with more benefits than Mexicans, although both are located at the bottom of the employment market in the U.S. In addition, the rate at which the Mexican population is increasing in the United States, which is much faster than that of Central Americans, means that the proportion of those who are more recent, less expert, and willing to work under almost any conditions is larger in the Mexican immigrant population. This may explain why the average socioeconomic indicators for Mexican immigrants as a whole are less favorable.

It is obvious that the form of social integration into the U.S. for both groups of immigrants, driven by a growing proportion of undocumented immigration, excludes them from basic social benefits and prevents them from demanding and exercising their labor rights. Migration reflects a transborder labor market that has proved more powerful than the border controls with which the authorities have attempted to contain it. The cost of the existing tension between market forces and current immigration policies is being paid for by these immigrants.

Figure 5.19. Distribution of Mexican, Central American and Other Immigrants, and the U.S.-Born Population, by Type of Medical Insurance, 2005



Source: Estimates based on U. S. Census Bureau. Current Population Survey, March 2005.

Final Considerations

In recent decades, the United States has seen a rapid increase in documented and, especially, undocumented migration. As a result of the strong migration flow from Mexico, Mexicans are by far by the largest foreign-born group in the U.S. Central American migration, although numerically smaller than that from Mexico, has also shown enormous dynamism, and Central Americans living in the United States constitute a sizable group.

California continues to be home to the largest number of Mexican and Central American immigrants. The U.S. destinations of these immigrants have diversified in recent years, however, making the problems associated with integrating these immigrants a challenge of national scope.

While their numbers differ markedly, both Mexican and Central American immigrants have played key roles in the U.S economy by helping meet the strong demand for labor in poorly paid manual jobs. Likewise, the immigration of these groups, particularly Mexicans, has significantly contributed to the growth of the working-age population. In California's case, the population of Mexican origin (immigrants and Mexican Americans) has played a crucial role by fostering a relative demographic rejuvenation, but above all by fueling the growth of the working-age population and satisfying a structural demand of the labor market for unskilled labor.

Although the U.S. government's immigration policies are fairly restrictive, immigration from Mexico and Central America is likely to continue at high levels due to the economic integration and the interdependence between the U.S. and those nations, as well as to the asymmetry of the economies and the strong social networks among families with immigrants.

One of the greatest challenges faced by the nations involved is to reduce the high social costs and risks involved in migration. The increase in the number of undocumented Mexicans and Central Americans U.S. constitutes one of the most challenging features of immigration today.

Far from reducing the number of undocumented immigrants, the growing difficulty of entering the United States as a result of increasingly strict measures at the border has contributed to less temporary (circular) migration and a greater tendency for immigrants to remain in the U.S. once they have successfully crossed the border.

There is growing fallout caused by both public and political opposition to undocumented immigration, which is rooted in part in the government's limited ability to control its borders. The result is a hostile environment toward immigrants in receiving communities, as well as discriminatory expressions and practices.

Unlike the importance given to immigration control policies, very little attention has been paid to the policies for integrating immigrants. Instead, recent years have seen the imposition of new obstacles and serious limitations on immigrants' access to social benefits. One of the rationales for this policy emphasis has been the attempt to deter undocumented immigration. Nevertheless, this goal has not been achieved, since the incentive to migrate does not lie in access to social privileges or social goods, (although these policies have undoubtedly led to the deterioration of immigrants' living conditions).

The socioeconomic profile of Mexican and Central American immigrants, together with their incomplete social integration, places them in a situation of extreme vulnerability. One key indicator of that vulnerability is their exceptionally low level of medical care insurance coverage.

The inability of many Mexican and Central American immigrants to individually afford health insurance makes them financially vulnerable in the event that they become seriously ill and have to go to the hospital. Moreover, the relatively high cost of medical care in the U.S. means that immigrants do not use prevent services and tend to postpone medical care in the event of illness, which contributes to the deterioration of their health. The declining health of immigrants over time has harmful effects for both the host community and the community of origin.

Thus the importance of dealing with the migration-health nexus. Immigrants' health status is an essential asset in the development of their capacities, adequate performance at work, and social integration. Enjoying good health not only benefits the immigrants themselves and their offspring, but also has larger social and economic implications in both their places of origin and destination. Immigrants' health should therefore occupy a priority position on the agendas of the Mexican, Central American, and U.S. governments.

The migratory dynamic between Mexico and the United States raises a series of challenges that can be analyzed from several angles. This study has focused on the inadequate integration of Mexican immigrants in the U.S., particularly those regarding their socioeconomic integration and health access.

This review of the trends in Mexican and Central American migration to the United States in recent decades, as well as of some of their sociodemographic and economic characteristics, has one primary aim: to provide information that can be used to design new medical insurance models, whether private, public, or mixed, that will deal with immigrants' urgent needs in this regard and meet the needs of immigrants as transnational agents with interests and obligations on both sides of the border.

Below are some of the issues to be considered in the design of new medical insurance plans or programs:

1. The Mexican and Central American population in the United States is extremely large, which is an incentive to create and implement new insurance products.

- These 11 million Mexican immigrants are as numerous as the most highly populated state in Mexico and equivalent to 10% of the total Mexican population. Forty-four U.S. states each have populations smaller than the total number of Mexican immigrants in the U.S.
- The Mexican-American population is also extremely numerous: 17.5 million people are U.S.-born of Mexican descent, 8.7 million of whom are the children of Mexican parents.
- Immigrants from Central American total 2.7 million, a figure that increases to 4 million when their U.S.-born offspring are included.

2. Expanding immigrants' access to medical insurance is a need for most Mexican and Central American immigrants.

- The number of Mexican immigrants without medical insurance is 5.9 million, a figure that is greater than the population in 28 out of the 32 states in Mexico. Likewise,

Mexican Americans without medical insurance total 3.9 million, bringing the number of people of Mexican origin who need medical insurance to nearly 10 million.
- The Central American population without medical insurance totals over 290,000.

3. Flexible schemes are needed that will cover both immigrants' nuclear families and other relatives and household members.

- Immigrants comprise households with complex structures, many of which are made up of the nuclear family and other relatives or persons without kinship ties. Although most households are nuclear, nearly three out of 10 are extended or compound households, which is linked to their greater willingness to take in relatives and, to a lesser extent, people to whom they do not have kinship links.

4. The medical insurance coverage needs of immigrants' families are different for each member because they are commonly in mixed-status households, in most cases immigrant parents with U.S.-born children.

- Mexican households where one or more members lack citizenship, and are often undocumented, make up 82% of the total.
- In 62% of Mexican immigrant households, at least one member lacks medical insurance.

5. Immigrants' medical insurance needs transcend borders, with coverage often needed as well for their dependents in their places of origin.

- There is evidence that many immigrants come from geographically separated families. Over one out of every four (27%) of those interviewed in one survey of recent Mexican immigrants had at least one child still residing in Mexico, and in 16% of cases their spouses still lived in Mexico.

6. Immigrants maintain close links with relatives in their countries of origin.

- Over half of Mexican immigrants call their relatives at least once a week, and nearly nine out of every 10 do so at least once a month (87.7%).

7. Sending remittances is the most obvious expression of the solid links binding immigrants to their relatives in their communities of origin.

- 85% of recent immigrants interviewed send money to family in Mexico, and eight out of every 10 in this group do so once or several times a month.
- The total amount of remittances has increased nearly 10-fold in the past 15 years, from $2.5 billion in 1990 to $20 billion in 2005.

8. Remittances help cover the health expenses of immigrants' relatives in their places of origin.

- Households in Mexico that receive remittances spend an average of 50% more on health care than households that do not receive money from abroad.

9. Remittances are a powerful way of connecting immigrants and their families to banking and financial systems.

- Likewise, new medical insurance models linked to banking systems could help both immigrants and their communities of origin to begin using the banking system, which could also reduce the costs of sending remittances and encourage both savings and investment in health.

10. Medical insurance models should consider the fact that immigrants have low incomes.

- The average annual income of Mexican workers in the United States totals $22,138, a figure that is slightly lower than the $24,574 income of Central American migrant workers.

11. The Mexican and Central American immigrant population's low educational attainment makes it difficult for them to take advantage of better employment opportunities.

- Over half of all Mexican immigrants age 25 and over have fewer than 10 years' schooling.
- A third of all Central American immigrants age 25 and over have fewer than 10 years' schooling.

12. The low medical insurance coverage of immigrants is due to their limited access to private insurance, which is usually obtained through employment.

- Rates of public medical insurance coverage among both recently arrived and longer-stay Mexican immigrants are about the same as the national average (12.4% and 15.7% among groups of Mexicans respectively, versus 16.2% nationwide). Conversely, there are sharp differences in private medical insurance coverage— approximately 45% lower for recent Mexican immigrants than for U.S.-born whites, and 29% lower for longer-stay Mexican immigrants

13. The most pressing needs for medical insurance occur in the groups of recent arrivals in the United States, for whom social integration proves more difficult due to their lack of experience and knowledge of the U.S. and their need to accept low wage and low benefit job offers, regardless of the social cost involved.

14. Approaches are required that will expand access to medical insurance of both manual and nonmanual workers.

- The coverage gap between recently arrived Mexican immigrants and the U.S.-born white population is nearly 45 percentage points in nonmanual jobs and over 50 points in manual occupations.

15. The immigrant population living in poverty is the most vulnerable.

- An immigrant's risk of being excluded from social protections such as medical insurance is exacerbated by poverty, particularly in the case of the Mexican population.
- Recent Mexican immigrants have by far the lowest medical insurance coverage rates, both among those living in poverty (22.7%) and those not (36.4%), followed by Mexicans with 10 or more years' residence in the U.S. and living in poverty (42.7%).

16. The U.S. health care system has been most successful at covering the health care needs of the youngest immigrants and women, who, in many cases, are eligible for and beneficiaries of public insurance programs.

- The working-age immigrant population, particularly men, is the least protected.

Designing new, financially sustainable medical insurance models for immigrants constitutes an enormous challenge. In addition to the numerous obstacles derived from their low educational attainment and location at the bottom of the occupational hierarchy in the U.S. labor market, a large number of immigrants fear public agencies due to their undocumented immigration status.

Given the overwhelming evidence of problems in the current situation, voices have been raised about the need to adopt and implement changes in U.S. immigration policies, particularly in the processes governing legalization and granting of U.S. citizenship to Mexican immigrants. In our view, and given the impact and range of its implications, the need for changes in this area constitutes the main challenge for Mexico-United States immigration processes under contemporary conditions. Undertaking this challenge appears to be reflected in the current efforts and desires of government leadership in both Mexico and the U.S.

If new immigration policies were implemented that were consistent with these new realities, paved the way for legal, orderly immigration, protected immigrants' rights, and satisfied U.S. labor market demands, then it would also be possible to promote new medical insurance models in which the parties involved (immigrants, entrepreneurs, indirect beneficiaries, governments of the sending and receiving countries) assumed their respective responsibilities and obligations.

Despite the enormous difficulties involved in expanding access to medical insurance, there is an urgent need to develop policies that will cope with the crisis in access to health care affecting the immigrant population in the U.S. and to discard the false notion that denying health care to immigrants is another tool for immigration control.